

## Cellular and cytotoxic mechanisms in cadmium exposed renal distal ephelial A6-cells

Faurskov Rasmussen, Brian

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Ph.D. Thesis:

**CELLULAR AND CYTOTOXIC MECHANISMS  
IN CADMIUM EXPOSED RENAL DISTAL EPITHELIAL A6-CELLS**

Brian Faurskov



Department of Life Sciences & Chemistry

Roskilde, May 2000

*Roskilde University*

**The present thesis is based on the following articles/manuscripts:**

- I. Faurskov, B. & Bjerregaard, H. F. Effect of Cadmium on Active Ion Transport and Cytotoxicity in Cultured Renal Epithelial Cells (A6). *Toxicology in Vitro*, 11, 717-722, 1997.
- II. Bjerregaard, H. F & Faurskov, B. Cadmium-induced Inhibition of ADH-stimulated Ion Transport in Cultured Kidney-derived Epithelial Cells (A6). *ATLA*, 25, 271-277, 1997.
- III. Faurskov, B. & Bjerregaard, H. F. Effect of Cisplatin on Transepithelial Resistance and Ion Transport in the A6 Renal Epithelial Cell Line. *Toxicology in Vitro*, 13, 611-617, 1999.
- IV. Faurskov, B. & Bjerregaard, H. F. Chloride secretion in kidney distal epithelial cells (A6) evoked by cadmium. *Toxicology and Applied Pharmacology*, 163, 267-278, 2000.
- V. Faurskov, B. & Bjerregaard, H. F. Cadmium mobilizes intracellular calcium in a hormone-like manner in renal distal epithelial A6 cells. *In submission in American Journal of Physiology*.
- VI. Bjerregaard, H. F. & Faurskov, B. Temporary entitled: "Nickel acts as an CaR activator in A6 cells". *In preparation*.

## PREFACE

The present thesis is the result of work carried out at the department in the laboratory of assistant professor Henning F. Bjerregaard and in the laboratory of professor dr. rer. Wolfgang Clauss, Giessen University, Germany. The work began early 1996 where Henning introduced a research area totally new to me dealing with electrophysiological measurements. Very early, preliminary experiments with cadmium exposed epithelia cells displayed promising results that encouraged me to work further with this subject. In spring 1997 I went to dr. Clauss' laboratory to extend the electrophysiological experiments with noise analysis. I stayed four months in Giessen and I am deeply grateful for the hospitality and obligingness that I met from the whole staff. I still often think back and I sure miss them all. Especially, I would like to thank Mathias Rehn with whom I spend many good moments around the area of Giessen and when invited to his home. Matthias also showed the kindness to introduce me into the mystery of noise analysis and helped me a lot performing additional short-circuit-current experiments. Back in Denmark the project took a new angle when I realized that the observed cadmium-mediated effects involve calcium-mobilization. I therefore began additional experiments employing fluorescence techniques during 1998 and the early 1999.

I am truly grateful to the dear students who were involved in my research area. I supervised three groups of students. All of them were skilled, motivated and hard-working and provided me with very interesting results inspiring me to deepen more into the research area. Some of these results were published later or are presently part of submitted/accepted manuscripts.

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*No one mentioned - no one forgotten.*

## ABBREVIATIONS

$\Delta I_{sc(Cd)}$	$Cd^{2+}$ induced increase in $I_{sc}$
$[\Delta Ca^{2+}]_{Cd}$	$Cd^{2+}$ -induced $Ca^{2+}_i$ mobilization
$[\Delta Cl^-]$	Change in $Cl^-$ concentration pr. minute
$[\Delta Cl^-]_{Cd}$	$Cd^{2+}$ -activated secretion
$[Ca^{2+}]_i$	Free calcium ions in the cytoplasm
AC	Adenylate cyclase
AVT	Arginine vasotocin
Cd-MT	Cadmium-metallothionein complex
ER	Endoplasmic reticulum
FFA	Flufenamic acid
$G_{te}$	Conductance
$H_{0.5}$	Half maximal stimulation concentration
$IC_{50}$	Half maximum inhibition concentration $IC_{50}$
$I_{sc}$	Short-circuit-current
MDR	Multi-drug resistance
NFA	Niflumic acid
NRS	Normal Ringer solution
NRS-Glu	NRS containing glucose
PB	Probenecide
PDE	Phosphodiesterase
PTWI	Tolerable weekly intake
$R_{te}$	Transepithelial resistance
TG	Thapsigargin

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## 1. DANSK RESUMÉ

Cadmium er en vigtig industriel og naturligt forekommende forureningskilde, som forårsager svær skade på flere organer, hvor især nyrerne er særlige sårbare. Størsteparten af optaget cadmium reabsorberes og akkumuleres i de proximale tubuli, men skader på de distale tubuli tyder på at cadmium også påvirker denne del af nyresegmentet. Almindeligvis har undersøgelser af cadmiumtransport, akkumulering og intracellulære effekter på den distale tubuli ikke modtaget stor opmærksomhed, hvorfor informationer herom på transporterende "tætte" epithelceller er yderst begrænsede. Formålet med dette studie var således at opnå (yderligere) kendskab til de mekanismer, hvormed cadmium ( $\text{Cd}^{2+}$ ) påvirker de renale distale epithelceller, A6, med særlig fokus på basolaterale effekter og deraf følgende mulige cytotoxiske effekter.

Cytotoksiske undersøgelser viste, at cadmium virkede langt mere cytotoxisk når A6 celler blev eksponeret for cadmium fra den basolaterale side i forhold til apical eksponering af A6 monolag. Aktiv iontransport, der blev bestemt ved brug af kortslutningsstrømsteknikken ( $I_{sc}$ ), viste at kun hvis  $\text{Cd}^{2+}$  blev tilsat den basolaterale side af A6 monolag førte dette til en prompte og forbigående stigning i kortslutningsstrømmen ( $\Delta I_{sc(\text{Cd})}$ ). Endvidere var  $\Delta I_{sc(\text{Cd})}$  dosis-afhængig, der udviste en halv-maksimal stimuleringskoncentration på  $385,9 \pm 10,7 \mu\text{M}$  og en maksimal stimuleringskoncentration på omtrent 1 mM. Nærmere undersøgelse af  $\Delta I_{sc(\text{Cd})}$  viste, at  $\text{Na}^+$ -transport ikke var involveret, men at  $\Delta I_{sc(\text{Cd})}$  alene var afhængig af  $\text{Cl}^-$  transport, hvilket blev yderligere underbygget af  $\text{Cl}^-$  tømning- og  $\text{Cl}^-$ -kanalhæmmerforsøg. Direkte bestemmelse af  $\text{Cl}^-$  transport ved brug af den  $\text{Cl}^-$  sensitive probe, SPQ, viste ligeledes at  $\text{Cd}^{2+}$  førte til  $\text{Cl}^-$  sekretion i A6 celler. Både i  $I_{sc}$ - og SPQ-forsøg var de to fenemater, flufenemat og nifluminat, der begge er i stand til at hæmme  $\text{Ca}^{2+}$  afhængige  $\text{Cl}^-$  kanaler, de mest effektive hæmmere af  $\text{Cd}^{2+}$  stimuleret  $\text{Cl}^-$  transport, hvilket indikerer at  $\text{Ca}^{2+}$  mobilisering er involveret.

Tømning af calciumlagre, anvendelse af thapsigargin (TG), der hæmmer  $\text{Ca}^{2+}$  ATPaser i endoplasmatisk reticulum, og anvendelse af  $\text{Ca}^{2+}$  ionophoren A23187 viste at  $\text{Ca}^{2+}$ -mobilisering spiller en vigtig rolle i  $\Delta I_{sc(\text{Cd})}$ , og at denne  $\text{Ca}^{2+}$  stammer fra intracellulære lagre. Direkte bestemmelse af intracellulær  $\text{Ca}^{2+}$ , viste, at  $\text{Cd}^{2+}$  forårsager en kraftig forbigående hormonlignende top, der var dosis-afhængig. En nylig identificeret  $\text{Ca}^{2+}$ -følsom receptor (CaR) er blevet lokaliseret i parathyroidea og siden også i nyrerne. Denne receptor er muligvis ansvarlig for de observerede  $\text{Cd}^{2+}$ -afhængige effekter. Ekstracellulær  $\text{Ca}^{2+}$ , aktiverer CaR, hvorved phosphoinositid 4,5-diphosphat spaltes af phospholipase C (PLC) til 1,4,5-triphosphat ( $\text{IP}_3$ ) og diacylglycerol. CaR genkender antagelig andre agonister end  $\text{Ca}^{2+}$ , f.eks.  $\text{Mg}^{2+}$  og  $\text{Gd}^{3+}$ , men også polykationer som f.eks. neomycin. PLC-hæmmeren, U73122, og CaR-agonisten, neomycin, påvirkede således begge  $\text{Cd}^{2+}$ -afhængig  $\text{Ca}^{2+}$ -stigning ( $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$ ), hvilket indikerer at CaR er involveret. Ligeledes reducerede TG  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$ , hvilket tyder på at  $\text{Ca}^{2+}$  stammer fra intracellulære lagre. Følgelig viste direkte målinger af  $\text{IP}_3$ -niveauet, at dette øgedes 1,45 gange i forhold til basalniveauet når A6 celler blev eksponeret for  $\text{Cd}^{2+}$ . Endelig tyder observationerne på, at de nærtbeslægtede tungmetaller, zink ( $\text{Zn}^{2+}$ ) og nikkel ( $\text{Ni}^{2+}$ ), begge i kraftigere grad end  $\text{Cd}^{2+}$  kunne inducere  $\text{Ca}^{2+}$  mobilisering ( $\text{Zn}^{2+} > \text{Ni}^{2+} > \text{Cd}^{2+}$ ).  $\text{Zn}^{2+}$  og  $\text{Ni}^{2+}$  øgede tillige  $\text{IP}_3$ -dannelsen signifikant over basalniveauet. Både  $\text{Zn}^{2+}$  og  $\text{Ni}^{2+}$  var i stand til fuldstændigt at fjerne  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$ , hvis disse metaller blev tilsat forud for  $\text{Cd}^{2+}$  tilsætning. Det er derfor sandsynligt, at  $\text{Cd}^{2+}$ , sandsynligvis også  $\text{Zn}^{2+}$  og  $\text{Ni}^{2+}$ , fungerer som en CaR-agonist, der ved aktivering fører til  $\text{IP}_3$ -afhængig frigørelse af  $\text{Ca}^{2+}$  fra intracellulære lagre.

Herudover viste undersøgelserne at  $\text{Cd}^{2+}$  reducerede det antidiuretiske hormonrespons ved at hæmme adenylatcyclase (AC) aktiviteten, hvorved det intracellulære cAMP-niveau faldt. Da CaR-aktivering medfører hæmning af AC og øget  $\text{Ca}^{2+}$ , tyder dette ligeledes på at basolateral  $\text{Cd}^{2+}$  fungerer som en CaR-agonist i A6-celler. Det er derfor tænkeligt, at  $\text{Cd}^{2+}$  virker toksisk i det

distale nefronsegment og at vigtigheden af cadmiumforårsagede forstyrrelser af distal nefronfunktioner underestimeres pga. overvældende proximal tubulus beskadigelse. Efterfølgende forstyrrelser af calciumhomøostase og vand/elektrolyt balance i den distale tubulus medfører tillige diffuse symptomer, hvis oprindelse kan være svær at bestemme. Overordnet er det derfor sandsynligt at distal tubulus toksicitet indgår i de overordnede nyreskader, som observeres ved cadmiumeksponering.



## 2. ENGLISH SUMMARY

Cadmium is an important industrial and environmental pollutant that causes severe damage to a variety of organs, especially the kidney. Most cadmium is reabsorbed and accumulated in the proximal tubules. However, evidence for distal tubule toxicity suggests that cadmium may interfere at this nephron site too. In general, distal nephron studies of  $\text{Cd}^{2+}$  transport, accumulation and intracellular effects receive little attention and thus limited information regarding mechanisms and effects of inorganic cadmium on transporting tight epithelia cells is available. Hence, the aim of the presented work was to gain further knowledge of the mechanism by which  $\text{Cd}^{2+}$  acts on the distal renal epithelia A6 cells with special emphasis on the effects when applied to the basolateral surface of the epithelium and to evaluate possible concomitant cytotoxicity.

Cytotoxic studies demonstrated side-specific effects as  $\text{Cd}^{2+}$  was far more cytotoxic when applied to the basolateral side than to the apical side of A6 monolayers. Active ion transport measured as the short-circuit-current ( $I_{sc}$ ) revealed that  $\text{Cd}^{2+}$  caused  $I_{sc}$  to increase promptly and transiently ( $\Delta I_{sc(\text{Cd})}$ ) only when applied to the basolateral surface of A6 monolayers. Furthermore,  $\Delta I_{sc(\text{Cd})}$  was dose-dependent with a half-maximal stimulation concentration of  $385.9 \pm 10.7 \mu\text{M}$  and a maximal stimulation concentration of approximately 1 mM. Exploring the ionic nature behind  $\Delta I_{sc(\text{Cd})}$  demonstrated that  $\text{Na}^+$ -transport was not involved but that  $\Delta I_{sc(\text{Cd})}$  relied entirely on  $\text{Cl}^-$ -transport. Additionally,  $\text{Cl}^-$ -depletion and  $\text{Cl}^-$ -channel inhibitor experiments supported this. Direct measurements of  $\text{Cl}^-$  secretion using the  $\text{Cl}^-$  sensitive probe, SPQ, also proved that  $\text{Cd}^{2+}$  evoked  $\text{Cl}^-$  secretion in A6 cells. Both  $I_{sc}$ - and SPQ-experiments showed that the two fenemates, flufenamic acid and niflumic acid, both known as inhibitors of  $\text{Ca}^{2+}$ -dependent  $\text{Cl}^-$  channels, were the most potent inhibitors of  $\text{Cd}^{2+}$ -evoked  $\text{Cl}^-$ -transport suggesting the involvement of  $\text{Ca}^{2+}$ .

Calcium-depletion, using thapsigargin (TG), an inhibitor of  $\text{Ca}^{2+}$  ATPases in endoplasmic reticulum and the  $\text{Ca}^{2+}$ -ionophore, A23187, provided evidence for the involvement  $\text{Ca}^{2+}$  in  $\Delta I_{sc(\text{Cd})}$ , which originated from internal stores. Direct measurements of intracellular  $\text{Ca}^{2+}$ , showed that  $\text{Cd}^{2+}$  produced a large transient hormone-like spike that was dose-dependent. Recently, a calcium-sensing receptor (CaR) has been identified in the parathyroid and later also in the kidney that may transduce the biological effects of  $\text{Cd}^{2+}$ . Activation of the receptor by increased levels of extracellular  $\text{Ca}^{2+}$  results in the breakdown of phosphoinositide 4,5-diphosphate by phospholipase C (PLC) and the formation of 1,4,5-inositol-triphosphate ( $\text{IP}_3$ ) and diacylglycerol. CaR presumably recognizes other cations than  $\text{Ca}^{2+}$ , e.g.  $\text{Mg}^{2+}$  and  $\text{Gd}^{3+}$ , and even polycations such as neomycin. The PLC-inhibitor U73122 and the CaR-agonist, neomycin, both affected  $\text{Cd}^{2+}$ -evoked increase in intracellular  $\text{Ca}^{2+}$  ( $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$ ) suggesting the involvement of CaR in  $\text{Cd}^{2+}$ -mediated cell signalling. Further, TG significantly reduced  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  showing that  $\text{Ca}^{2+}$  originates from internal stores. Extending these observations,  $\text{IP}_3$ -binding studies showed that the concentration of intracellular  $\text{IP}_3$  underwent a 1.45-fold increase proportional to the resting level when exposed to  $\text{Cd}^{2+}$ . Finally, it was shown that the  $\text{Cd}^{2+}$ -related heavy metals,  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$ , were even more potent inducers of  $\text{Ca}^{2+}$ -mobilization than  $\text{Cd}^{2+}$  with the following potency:  $\text{Zn}^{2+} > \text{Ni}^{2+} > \text{Cd}^{2+}$ .  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$  also significantly increased the  $\text{IP}_3$ -generation above control level. Moreover, preexposure with  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$  completely abolished  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$ . Thus, it is hypothesized that  $\text{Cd}^{2+}$ , possible also  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$ , may act as a CaR-agonist leading to  $\text{IP}_3$ -mediated release of  $\text{Ca}^{2+}$  from intracellular stores.

Moreover, it was shown that  $\text{Cd}^{2+}$  significantly diminished the response of antidiuretic hormones by reducing the cAMP level through inhibition of the adenylate cyclase (AC) activity. CaR-activation leads to inhibition of the AC-activity and increased  $\text{Ca}^{2+}$ , which also suggests that basolateral  $\text{Cd}^{2+}$  may serve as a CaR-agonist in A6 cells. Accordingly, it is proposed that  $\text{Cd}^{2+}$  perhaps serves as a distal nephron toxicant and that the importance of cadmium-mediated

disturbances of distal nephron functions may be underestimated because of overwhelming proximal tubule damage. Subsequently, disturbances of calcium homoeostasis and water/electrolyte balance in the distal tubule cause nonspecific symptoms from which the origin is difficult to decide. Therefore, it is suggested that distal tubule nephrotoxicity may be a part of overall renal cadmium toxicity.

### 3. INTRODUCTION

#### 3.1. Presentation

Cadmium is a recognized renal toxicant (WHO, 1992). The mechanisms behind the proximal tubular cell toxicity, due to exposure to Cd-complexes in urine, is rather well investigated (Nordberg, 1992). Cadmium may, however, have other effects on renal cells. The present thesis explores molecular mechanisms behind cadmium toxicity to distal renal culture cells. Please note that in the text the term "cadmium" is used when the specific chemical form of this metal is not known or when several cadmium species are to be considered. The term " $\text{Cd}^{2+}$ " is used if the involvement of the free ion is known or suspected.

Preliminary studies at the laboratory using the Ussing technique soon demonstrated promising results regarding the effect of cadmium on electrophysiological endpoints in renal epithelial A6 cells. It was therefore decided to work further with this topic by extending and applying new techniques. However, before presenting the results obtained, the toxicity of cadmium will be introduced as this thesis deals primarily with effects of cadmium administration to A6 cells. In the following subjects dealing with cadmium in general, physio-toxicological aspects, considerations of apical and basolateral exposure, transport mechanisms and described cellular effects focussing primarily on *in vitro* studies in the kidney with special focuses on the distal nephron, will be covered. Furthermore, the use of A6 cells will be motivated and finally the purpose of this study will be outlined.

#### 3.2. Cadmium sources

Unlike many other metals, cadmium has come to be used by man only relatively recently. It was discovered independently and almost simultaneously by the two German investigators, Strohmeier and Hermann in 1817. Its large scale use dates from the 1940's, and it is only during the last three decades that serious consideration has been given to cadmium as an environment contaminant (Aylett, 1979).

Cadmium is widely dispersed in the environment. Major sources of cadmium are found in the United States, Mexico, Canada, Australia and Japan. Environmental contamination because of human activities such as mining, smelting, fossil fuel combustion and industrial use may increase the flow of cadmium into ecological cycles. For example, goldmining in Brazil (Moreira, 1996) have caused massive cadmium contamination in the marine ecosystem that subsequently, due to up concentration in the food chain, may lead to health problems of the people in the polluted area. The main technical uses, important for emissions to air, water and land are steel production, metal production, refining, cement manufacture, pigment manufacture, cadmium plating and battery manufacture (Thornton, 1992). Table 3.1 gives an estimate of cadmium emission to the ecosystem in the EC.

Cadmium is present in all parts of the environment; It is present in all soils, sediments and unpolluted seawater at concentrations which are generally  $< 0.5 \text{ mg/kg}$ ,  $< 1 \text{ mg/kg}$  and  $1 \text{ } \mu\text{g/kg}$ , respectively (Herber, 1994). In comparison, the cadmium concentration is  $0.05\text{-}0.5 \text{ mg/kg}$  in land fields,  $0.03\text{-}0.1 \text{ } \mu\text{g/l}$  in seawater and  $0.015\text{-}0.05 \text{ } \mu\text{g/l}$  in streams in Denmark (The Danish Environmental Protection Agency (EPA), Redegørelse fra Miljøstyrelsen, No. 1, 1995).

### 3.3. Food and daily intakes of cadmium

Human exposure to low levels of cadmium occur from inhalation from air and natural processes such as erosion of surface deposits of cadmium-containing minerals and subsequent uptake by plants and other edible organisms. The main parts of cadmium intake origins from vegetables and grain products. Offal also contributes to the cadmium intake. The highest cadmium concentrations are found in spinach, rice, wheat, shellfish, and kidney cortex of animals (Galal-Gorchev, 1993; Newberne, 1988; Sherlock, 1986). The daily intake of cadmium obviously depends on the personal diet. In uncontaminated areas the average daily intake is usually in the range 10-60 µg/day for a person of 70 kg. In rural "uncontaminated" areas in Japan the daily cadmium intake has been estimated at 59-113 µg, whereas in contaminated areas in Japan average daily intakes as high as 400 µg have been reported (Friberg, 1986).

*Table 3.1. Cadmium emissions (tonnes/year) to water, air and land in the EC. Data from Thornton, pp. 154, 1992.*

Source	Land	Air	Water
Metal production (iron and steel)	341	24	21.2
Refining nonferrous metals	338	31	27.3
Cement manufacture	261	-	-
Ashes from combustion	161	-	-
Oil combustion	-	28	-
Waste incineration	-	28	-
Coal combustion	-	21	-
Pigment manufacture	-	-	21.0
Cadmium plating	-	-	19.7
Battery manufacture	-	-	13.0

In 1989 WHO established a provisionally tolerable weekly intake (PTWI) for cadmium which, for adults, is of 7 µg/kg body weight corresponding to 400-500 µg/week for an adult Dane (the Danish EPA, Redegørelse No. 1, 1995 and publication No. 187, 1990). Measurements between 1983-1987 of cadmium intakes demonstrated that the average weekly intake of cadmium among the Danish people were about 140 µg, which corresponds to 30% of the PTWI-level (the Danish EPA, publication No. 187, 1990). Variations in intakes occur due to atypical dietary habits or because the food eaten is produced or grown in areas suffering from cadmium pollution. Accordingly, the average weekly intake of a small group of Danes is estimated at about 50 % of PTWI-level which is, according to the Danish EPA, "unacceptably high". Table 3.2 presents typical information on the dietary intakes of cadmium in various countries. All of the average weekly intakes presented in table 3.2 are below the PTWI, although national intake in Germany, Belgium and Italy appear to be close.

Besides intakes from food and drinking water (usually the concentration of cadmium does not exceed 5 µg/l), tobacco smoking, especially cigarettes, plays an important role in cadmium exposure of humans. In general, the cadmium load of smokers is twice that of nonsmokers. Smoking one cigarette, generally containing 1-2 µg cadmium, results in the inhalation of about 0.1-0.2 µg. The higher cadmium exposure among smokers is also reflected in higher cadmium

concentrations in blood. If it is assumed that about 10% of the cadmium present in cigarettes will be transferred into the blood (WHO, 1980), about 1 µg/day will be absorbed if a person smokes 15 cigarettes per day, which may result in an additional elevation of blood cadmium by 1 ng/ml (Friberg, 1986; Ikeda, 1992). Other lifestyle factors, besides diet and smoking, are far less important, however, the working environment can contribute considerably to cadmium intake in industries where technical and hygienic precautions are not implemented. Reported cadmium-blood levels for exposed workers generally lie between 5 and 50 µg/l (corresponding to 44 and 444 nM Cd<sup>2+</sup>), but during extremely high exposures levels as high as 300 µg/l (2.7 µM) were reported (Herber, 1994). The average blood concentration is about 0.5-1.0 µg/ml (4-9 nM) in nonsmokers and twice as high in smokers (Alessio *et al.*, 1992; Friberg, 1986).

*Table 3.2. Typical dietary intakes (mg/week) of cadmium (Sherlock, 1986).*

Country	Intake
Australia	0.15
Belgium	0.35
Denmark	0.14*
Germany	0.40
Italy	0.38
Japan	0.27
New Zealand	0.11
United Kingdom	<0.15
USA	0.23

\* The Danish EPA, publication No. 187, 1990.

### 3.4. Metabolism of cadmium

#### *Ingestion, distribution and excretion*

Cadmium uptake occurs primarily via inhalation and ingestion whereas accumulation via the skin plays no role. The absorption of inhaled cadmium in air is 10-50% and from the gastrointestinal tract about 5% with a maximum of 20% in people with low iron stores (Nordberg *et al.*, 1985; Herber, 1994). The daily excretion via faeces and urine is only about 0.01-0.02% of the total human body burden of cadmium (Nordberg *et al.*, 1985). The excretion via urine increases with age and is proportional to the body burden of cadmium, thus, dramatic increases in urine-cadmium occur when renal damage appears (Friberg, 1986).

After absorption from the lungs or the gut, cadmium is transported via blood to other parts of the body. It is likely that cadmium is bound for at least 70% to the red blood cells while plasma and serum levels are very low. Binding in plasma may be to albumin, to SH-groups of other proteins or other ligands. In liver cadmium is taken up, possibly after binding to albumin receptors, and induces the synthesis of the low-molecular-weight protein, metallothionein (MT) (Johnson, 1980; Klaassen *et al.*, 1999; Nordberg, 1992). Because of its low molecular weight, cadmium-MT (Cd-MT) is readily filtered through the glomeruli and taken up by tubular reabsorption in the renal tubule. Alternatively, when organisms are exposed to small amounts of

cadmium MT is induced in intestinal epithelia, and the resulting Cd-MT complex may act directly on the renal epithelia independently on the hepatic MT-induction (Andersen, 1992). Moreover, after subchronic or acute exposures direct transfer of cadmium, bound to small ligands such as cysteine, can occur from blood to kidney without any circulation of Cd-MT complex in plasma (Andersen, 1992; Foulkes, 1990a).

#### *Cellular uptake*

Cadmium uptake has been studied in several systems, and no general mechanism has emerged. Moreover, the mechanisms by which cadmium is taken up may vary from cell type to cell type. Although it has been stated often that ionic cadmium ( $\text{Cd}^{2+}$ ) may diffuse across the plasma membrane into the cell, this route is not likely to occur because of the hydrophilic nature of  $\text{Cd}^{2+}$  and the binding of  $\text{Cd}^{2+}$  to serum and cell proteins. Accordingly, rather high concentrations of  $\text{Cd}^{2+}$  support a model involving a four-step process; 1) nonspecific electrostatic binding of  $\text{Cd}^{2+}$  to anionic sites at the mucosal membrane, or 2) temperature-sensitive (passive) internalization into epithelial cytoplasm by movement due to membrane fluidity, 3) diffusion through the cytoplasm and 4) completion of the absorptive process by transport across the basolateral membrane into serosal fluid (Andersen, 1992; Foulkes, 1988).

Furthermore, cadmium uptake can be described as a kinetic model of second order with an initial rapid membrane binding followed by a slow internalization process (Foulkes, 1988; Prozialeck, 1993; Shaikh, 1995; Templeton, 1990). Moreover, cadmium transport may involve one or more processes, including; 1) the use of a calcium transport pathway involving  $\text{Ca}^{2+}$ -binding protein, 2) a carrier-mediated (active transport and/or facilitated diffusion) extrusion across the basolateral membrane via, e.g.  $\text{Ca}^{2+}$ -ATPases, 3) the binding of  $\text{Cd}^{2+}$  to sulfhydryl groups on either the apical or basolateral surface of the cell (Pigman *et al.* 1997), 4) the use of already existing transport systems for essential metals, like  $\text{Mg}^{2+}$  (Quamme, 1992), and 5) facilitated transport via inorganic anion exchanger as observed in proximal renal epithelial LLC-PK<sub>1</sub>-cells (Endo *et al.*, 1999). Even specific heavy metal ion transporter proteins have been characterized. They belong to the family of metal ion transporter CDF-proteins (the cation diffusion facilitator family) among which the P-type specifically catalyses either uptake or extrusion of  $\text{Cd}^{2+}$  or  $\text{Cu}^{2+}$  and a variety of mono- and divalent ions (Paulsen & Saier, 1997).

#### *Apical versus basolateral uptake*

Cadmium is believed to reach the kidney primarily, though not necessarily exclusively, as Cd-MT released to the plasma from the liver. Cd-MT is freely filtered at the glomerulus and reabsorbed from the lumen of the proximal tubule whereas (Friberg, 1986) Cd-MT apparently does not react with the basolateral membrane (for reviews see (Friberg, 1986; Herber, 1994;)). However, renal uptake from peritubular blood has been demonstrated in cases where cadmium is complex bound with small ligand molecules, such as cysteine and glutathione, (Foulkes, 1990a).

As mentioned above a variety of mechanisms have been proposed to explain the uptake of cadmium by various types of cells. However, no single mechanism can adequately account for the uptake of  $\text{Cd}^{2+}$  by all cells. In hepatocytes about 30% of the cadmium transport was through the basolateral membrane. Moreover, total cadmium accumulation through the basolateral membrane of renal cortical epithelial cells was about twice that through the apical membrane (Shaikh, 1995). Consistently with this observation, a higher accumulation of cadmium from the basolateral compartment than from the apical compartment was demonstrated in LLC-PK<sub>1</sub>-cells

(Bruggerman, 1990). In another study in LLC-PK<sub>1</sub>-cells, the basolateral cadmium accumulation was about 3-4 times higher than the apical (Prozialeck, 1993). The uptake from the apical compartment may involve a somewhat different mechanism, as Prozialeck, (1993) and Templeton (1990) both showed relatively little cadmium bound to the apical cell surface of LLC-PK<sub>1</sub> cells, and as the small amount of surface binding that did occur did not precede cadmium-uptake.

It is unclear whether similar basolateral transport systems may play a role in Cd<sup>2+</sup> transport *in vivo*. In general, most of the cadmium that reaches the tubular epithelia *in vivo* is bound to MT or other ligands, and the renal epithelium is exposed mainly from the apical cell surface. Apparently, there is some confusion about the specific species of cadmium that enters renal epithelia. The common theory is that cadmium enters the cells bound to ligands like MT, albumin etc. However, determination of the free cadmium uptake with the use of the fluorescence probe mag-fura-2 demonstrated that free cadmium is transported across the membranes into the intracellular space in renal MDCK epithelia cells (Quamme, 1992), supporting that Cd<sup>2+</sup> may be accessible for the intracellular milieu and able to react with sensitive sites. Furthermore, it has been demonstrated that divalent Cd<sup>2+</sup> may be nephrotoxic (Goyer *et al*, 1989) and that basolateral Cd<sup>2+</sup> uptake may significantly contribute to the total renal burden of Cd<sup>2+</sup> under certain conditions (Foulkes & Blanck, 1990b). Therefore, it is possible that under some conditions basolateral transport systems may contribute to the accumulation and toxicity of cadmium in some cells and tissues.

#### *Biological half-time*

The low excretion rate of cadmium leads to a very efficient retention in the body. The retention functions for cadmium are multiphasic and the half-time of the slowest compartment is usually more than 20% of the life-span for most animal species and humans (Nordberg *et al.*, 1985). The different compartments are likely to reflect retention in different tissues. Cadmium in the blood compartment may exchange with various tissues compartments as the binding of cadmium in the tissues is much stronger than in the blood (Herber, 1994). Human data suggest that the muscle depot of cadmium has one of the longest half-times, more than 30 years. Kidney-cadmium has a half-time of 10 to 30 years and liver-cadmium has a half-time of 5-15 years. The cadmium-accumulation curve for body burdens is almost straight from age 0 to about age 50 (Nordberg *et al.*, 1985). Because of these long half-times and continuous transfer of cadmium from other tissues, cadmium accumulation in the kidney will take place during the whole life-span (Friberg, 1986).

### **3.5. Toxicological aspects**

#### *Acute effects*

Exposure to high concentrations of fumes from heated cadmium or cadmiated compounds/items has led to acute poisoning and in some cases to death of workers. Principal symptoms reported were respiration distress due to pneumonitis and edema with secondary effects on the kidney (Friberg, 1986; Goyer, 1989). In the past (1940-1950) many cases of acute food poisoning occurred, but nowadays acute poisoning, apart from accidents, is rare (Friberg, 1986).

### *Chronic effects*

Generally, the critical organ for cadmium exposure is the kidney due to lifelong accumulation, especially after extended low dose cadmium exposure. Thus, the most typical feature of chronic cadmium intoxication is kidney damage and clinical symptoms are related to the kidney damage, which in grave cases may lead to osteotoxicity and other calcium-related diseases as described below. In some cohorts with pulmonary exposure to cadmium, lung cancer and chronic bronchitis have been claimed to be increased (Kazantzis *et al.*, 1992). Studies in 1970's on chronic cadmium poisoning in man in Belgium showed that the earliest effect was a renal dysfunction with proteinuria. The proteinuria may be accompanied or preceded by a variety of other renal effects (Bernard *et al.*, 1992). After occupational exposure levels, workers have developed, besides proteinuria, renal glucosuria, aminoaciduria, hypercalciuria, phosphaturia, and polyuria. Some workers suffered from renal colic due to recurrent kidney stone formation (Friberg, 1986; Goyer, 1989; Herber, 1994). Long-term exposure to high dietary cadmium levels in a rural area of Japan has led to a renal disease of the same type as found with industrial long-term exposure, and to a severe osteomalacia-like bone disease known as *Itai-Itai* among middle-age and elderly women (Friberg, 1986; Kjellström, 1992).

As mentioned above the renal accumulation of cadmium is probably linear until the age of about 50. In humans the threshold for induction of kidney damage is considered to be a renal cortex level of 200 mg/kg (The Danish EPA, Redegørelse fra Miljø-styrelsen, No. 1, 1995). Measurements between 1981 and 1987 showed average cadmium concentrations in kidney cortex in 45 to 55 years old Danes of approximately 22 mg/kg (Hansen, 1989). Accordingly, cadmium evoked kidney damage in the average Dane is unlikely at the moment.

### *Extra renal effects & carcinogenicity*

The suggestion that exposure to cadmium may be a causal factor in human hypertension is based mainly on animal experiments (Staessen *et al.*, 1992). Most human studies, however, are hampered by the fact that confounding variables such as smoking and dietary habits, and other air pollutants make it difficult to draw solid conclusions about this effect (Ala-Opas, 1995; Friberg, 1986; Herber, 1994). Also, information on the genotoxicity and carcinogenicity of cadmium is still incomplete. In human beings, interest has mainly focussed on cancer in the prostate and lungs. There is a general understanding that data on a relationship between cadmium and prostatic cancer are inconclusive, mainly due to confounding factors such as cigarette smoking, diet and coexposure to other compounds (Herber, 1994; Nordberg, 1992; Tsuchiya, 1992). Also, increased mortality from lung cancer among workers exposed to cadmium has been observed in several occupational cohorts. Most studies found an increase in lung cancer risk of the order 25-50% (Bofetta, 1992; Friberg, 1986; Kazantzis *et al.*, 1992). Lung cancer evoked by cadmium inhalation in experimental animals is apparently restricted to the rat, as no cadmium-related tumours occur in hamsters and mice (Heinrich, 1992; Maximilien *et al.*, 1992). In general, cadmium compounds are considered as weak mutagens. However, cadmium at non-cytotoxic doses interferes with DNA-repair processes and enhances the genotoxicity of directly acting mutagens (Hechtenberg *et al.*, 1996). Hence, the inhibition of repair and detoxifying enzymes by cadmium may partially explain the observed weak genotoxic properties of this metal (for reviews see Beyersmann & Hechtenberg, 1997; Hartwig, 1994; Rossman *et al.*, 1992; Smith, 1994).



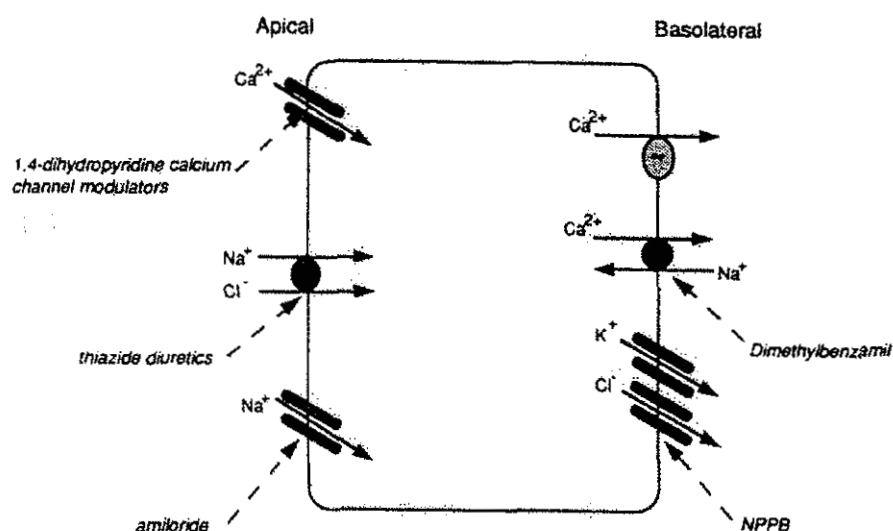
### 3.6. Renal handling of calcium and $\text{Ca}^{2+}$ homeostasis

Prolonged exposure to elevated concentrations of cadmium cause disturbance of  $\text{Ca}^{2+}$ -homeostasis, which can lead to various bone diseases and influence the level of  $\text{Ca}^{2+}$  in the blood. Some important symptoms and diseases are *Itai-Itai*, osteoporosis, calcuria, kidney stone formation etc. (Friberg, 1986; Goyer *et al.*, 1994; Järup *et al.*, 1998; Savolainen, 1995). The impact of cadmium on  $\text{Ca}^{2+}$ -homeostasis is of major interest for this thesis why the subject will be discussed in more details.

The kidney is important in maintenance of calcium homeostasis as this organ is responsible for the “fine tuning” of blood calcium (for reviews see (Bindels, 1993; Friedman & Gesek, 1993; Seldin, 1999) and bone calcium net flux (Kjellström, 1992). To maintain a net  $\text{Ca}^{2+}$  balance, more than 98% of the filtered load of  $\text{Ca}^{2+}$  must be reabsorbed along the nephron. There are two potential pathways through which net  $\text{Ca}^{2+}$  reabsorption can occur. First, a paracellular and passive route that predominates in the proximal tubules and thick ascending limb of Henle’s loop. Micropuncture studies have shown that approximately 55-65% of the filtered  $\text{Ca}^{2+}$  is reabsorbed in the proximal tubule (Costanzo & Windhager, 1992). Passive driving force coupled to  $\text{Na}^+$  transport are the major determinants of  $\text{Ca}^{2+}$  transport in this nephron segment (Bindels, 1993). Secondly, a transcellular, active transport against an electrochemical gradient is responsible for  $\text{Ca}^{2+}$  reabsorption in the distal nephron. The distal tubule is the main site of active transcellular  $\text{Ca}^{2+}$  transport and determines the fine tuning of  $\text{Ca}^{2+}$  excretion with the urine (Friedman & Gesek, 1993). In the distal convoluted and connecting tubule, active  $\text{Ca}^{2+}$ -reabsorption amounts to about 10% of the filtered load. A final of 1-3% of filtered  $\text{Ca}^{2+}$  is reabsorbed in the cortical collecting tubule (figure 3.1) (Costanzo & Windhager, 1992).

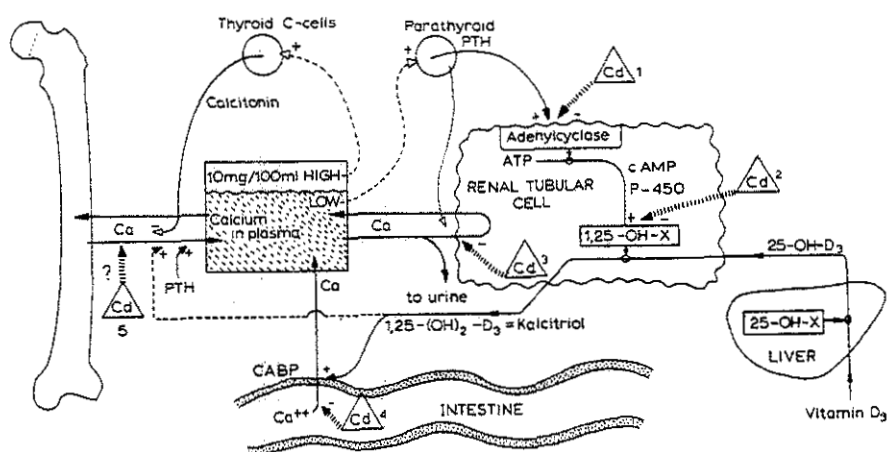
Transcellular  $\text{Ca}^{2+}$  transport, as it occurs in the distal segment, is a two-step process, which involves passive influx via  $\text{Ca}^{2+}$ -channels across the luminal membrane driven by a steep electrochemical gradient (electronegative cell interior) and active extrusion across the peritubular membrane driven by, e.g.  $\text{Ca}^{2+}$ -ATPase (Carafoli & Stauffer, 1992; Doucet & Katz, 1982) and  $\text{Na}^+/\text{Ca}^{2+}$  exchange mechanisms (figure 3.1) (Friedman, 1998; White *et al.*, 1996). Moreover, the renal  $\text{Na}^+/\text{Ca}^{2+}$  exchange system is apparently restricted to the distal tubule, at least in the rabbit kidney (Ramachandran & Brunette, 1989).

The distal convoluted tubule is the principal site for controlling the rate of active  $\text{Ca}^{2+}$  transport primarily by the calciotropic hormones, i.e. parathyroid hormones (PTH), calcitonin and 1,25-dihydroxyvitamin  $\text{D}_3$  (Bindels, 1993; Brown *et al.*, 1999; Seldin, 1999). PTH stimulates calcium absorption primarily in the distal nephron through dihydropyridine-sensitive calcium channels. Also, the mechanism of calcitonin action on  $\text{Ca}^{2+}$  transport, though not fully understood, might be identical to that of PTH (Friedman & Gesek, 1993). Additionally, 1,25-dihydroxyvitamin  $\text{D}_3$  appears to modulate PTH-dependent  $\text{Ca}^{2+}$  entry in a non-additive manner in distal epithelia (Friedman & Gesek, 1993; Hebert *et al.*, 1997). Overall, a fall in the extracellular  $\text{Ca}^{2+}$  ( $\text{Ca}^{2+}_o$ ) levels triggers the release of PTH, which increases the renal absorption of  $\text{Ca}^{2+}$  and osteoclast-mediated  $\text{Ca}^{2+}$  mobilization from bone. PTH also stimulated 1- $\alpha$ -hydroxylase activity in the renal proximal tubule and thus, the synthesis of 1,25-dihydroxyvitamin  $\text{D}_3$  which promotes absorption of  $\text{Ca}^{2+}$  from the intestine to the blood (Brown, *et al.*, 1999). A rise in  $\text{Ca}^{2+}_o$  triggers the secretion of calcitonin from thyroid follicular cells, which decreases the resorption of bone and increases the loss of  $\text{Ca}^{2+}$  in the urine (for review see figure 3.2 and (Champe & Harvey, 1987; De Luca & Baron, 1998)).



**Figure 3.1.** Model of cellular absorption in distal convoluted tubules. Transport mechanisms involved in apical calcium entry and basolateral efflux are depicted. Other transport proteins whose action impinges on calcium absorption (apical NaCl cotransport, Na<sup>+</sup> channels; basolateral Cl<sup>-</sup> channels) are shown. Drugs that modify these transporters are shown in italics. NPPB, 5-nitro-2-(3-phenylpropylamino) benzoic acid. From Friedman & Gesek, (1993).

Due to the nonspecific action of cadmium on proteins, ligands etc. the effects of cadmium exposure are expected to be versatile covering organs especially important for the maintenance of Ca<sup>2+</sup>-homoeostasis, e.g. the bones, intestine and the kidney. The different possible points of action of cadmium on calcium and vitamin D metabolism are depicted in figure 3.2.



**Figure 3.2.** Schematic drawing of those aspects of calcium and vitamin D that may be affected by cadmium. Cadmium may in number order; 1) decrease PTH stimulation of adenylcyclase, 2) inhibits renal hydroxylation of 25-OH-D<sub>3</sub>, 3) increase urinary calcium excretion, 4) decrease gastrointestinal calcium absorption, 5) affects bone mineralization directly (?). CABP = calcium binding protein. From: Kjellström (1985).

### *Calcium-sensitive receptors*

As indicated in the section above the calciotropic hormones play an important role in the regulation of renal  $\text{Ca}^{2+}$  (mineral ions) handling. However, in the absence of PTH and vitamin D a positive relationship between urinary  $\text{Ca}^{2+}$  excretion and circulating  $\text{Ca}^{2+}$  concentrations is still present (Hebert *et al.*, 1997), which indicates that  $\text{Ca}^{2+}_o$  itself is crucial in regulation of  $\text{Ca}^{2+}$ -balance.

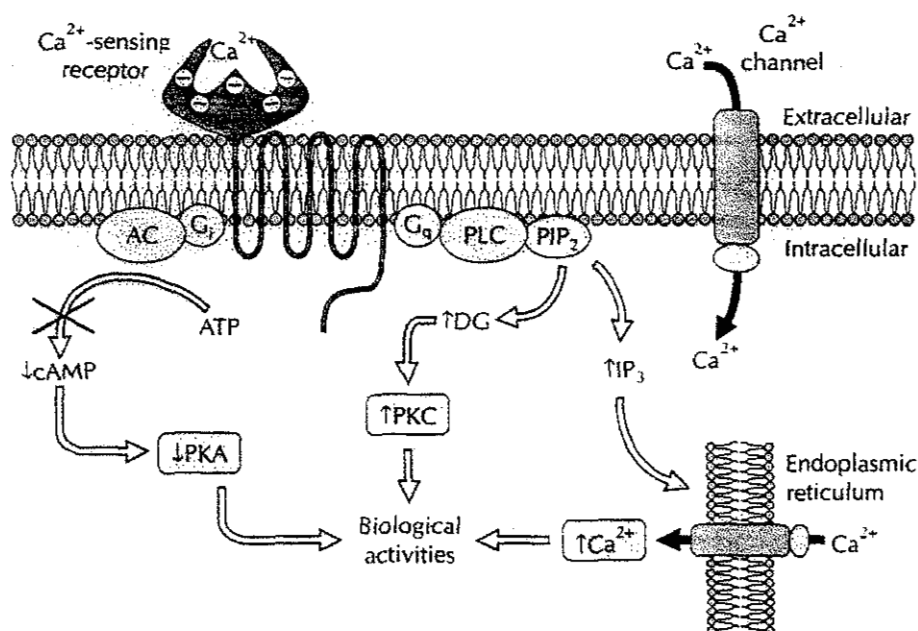
The ability of parathyroid cells to recognise and response to small changes in the extracellular  $\text{Ca}^{2+}$  concentration plays a crucial role in  $\text{Ca}^{2+}$  homeostasis. Recent studies have provided indisputable evidence that  $\text{Ca}^{2+}$  besides serving as an intracellular second messenger also serves a hormone-like role as an extracellular “first-messenger”. Evidence for that came along with cloning of an extracellular  $\text{Ca}^{2+}$ -sensing receptor (CaR) from bovine parathyroid gland (Brown *et al.*, 1993). This receptor plays a central role in the homeostatic system responsible for maintenance of constant blood  $\text{Ca}^{2+}$ -levels. When subjected to increased levels of  $\text{Ca}^{2+}_o$  (and  $\text{Mg}^{2+}_o$ ), cells expressing CaR respond with activation of phospholipase C (PLC) leading to accumulation of inositol-1,4,5-trisphosphate ( $\text{IP}_3$ ) and consequent release of  $\text{Ca}^{2+}$  from intracellular stores (figure 3.3). Accordingly, the CaR belongs to the seven-membrane spanning family found in all G-protein-coupled receptors (Jackson, 1991) showing low-affinity binding of cationic agonists. The CaR responds only in the millimolar ion concentration range that reflects the physiologically relevant  $\text{Ca}^{2+}$  concentration for extracellular fluid (Hebert & Brown, 1996).

The CaR, which is expressed on the surface of parathyroid cells, provides the principal mechanism for  $\text{Ca}^{2+}_o$  “sensing” in the parathyroid gland (see figure 3.2 and for reviews see (Brown *et al.*, 1998; Brown, 1999; Hebert & Brown, 1995). Moreover, the kidney like the parathyroid responds directly to alterations in  $\text{Ca}^{2+}_o$  with the resultant modulation of mineral ion transport (see refs. Baum & Harris, 1998; Chattopadhyay, Yamaguchi *et al.*, 1998; Hebert, 1996). Also, it is likely that CaR is expressed in many different nephron segments and that the polarity varies with cell type along the nephron, e.g. CaR is exclusively expressed at the basolateral surface of distal tubule cells (Riccardi *et al.*, 1998).

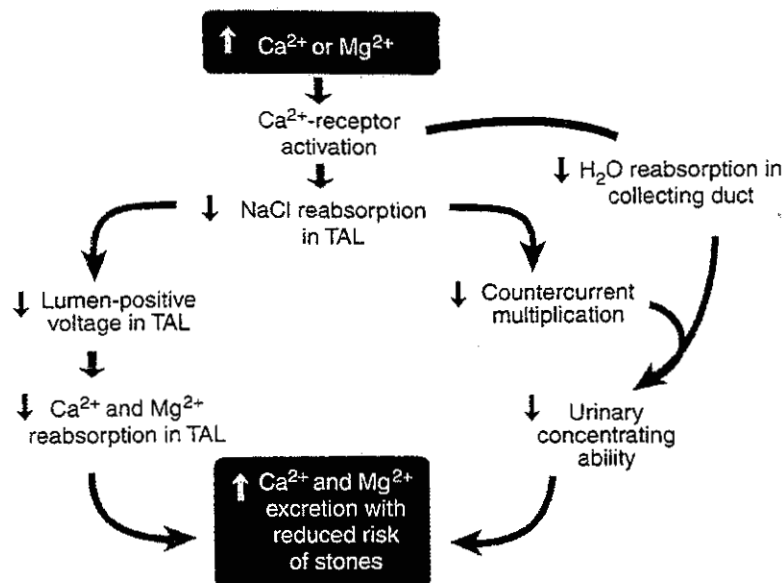
Thus, elevations of  $\text{Ca}^{2+}_o$  activate the CaR in the thick ascending limb (TAL)/distal segment and lead to reduced reabsorption of  $\text{Ca}^{2+}$  (and  $\text{Mg}^{2+}$ ) and hence increased  $\text{Ca}^{2+}/\text{Mg}^{2+}$  excretion in the urine. High concentrations of urinary  $\text{Ca}^{2+}$  can enhance the risk of stone formation. The absolute concentration of urinary  $\text{Ca}^{2+}$  is reduced by two mechanisms. First, NaCl transport by TAL is reduced as CaR activation lead reduction in levels of cyclic AMP which normally induce NaCl transport by activation of  $\text{K}^+$ -channels and  $\text{Na}^+\text{-K}^+\text{-2Cl}^-$ -coporter (Amlal *et al.*, 1996; Friedman, 1988; Hebert & Andreoli, 1984). Accordingly, the counter current is reduced and hence urinary concentrating ability. Also, the CaR-activation reduces antidiuretic hormone-stimulated water reabsorption leading to a more dilute lumen (Baum & Harris, 1998). Second, the lumen-positive potential decreases (Hebert & Andreoli, 1984), which is the driving force for  $\text{Ca}^{2+}$ . The result of these actions would be that  $\text{Ca}^{2+}$  is excreted at concentrations below saturation (see figure 3.4 and for reviews see (Chattopadhyay *et al.*, 1997; Chattopadhyay *et al.*, 1998; Hebert, 1996).

Strong support for a key role of CaR in the regulation of  $\text{Ca}^{2+}$ -homeostasis has been provided by analyses of several mutations of the CaR gene that causes well-known human clinical disorders of  $\text{Ca}^{2+}$  homeostasis (for reviews see Brown, 1999; Brown *et al.*, 1998). Familial hypocalciuric hypercalcemia (FHH) and neonatal severe hyperparathyroidism (NSHPT) are the heterozygous and homozygous forms, respectively, of inactivating CaR mutations that demonstrates an altered set point for  $\text{Ca}^{2+}$ -regulated PTH release (Pollak *et al.* 1993). Patients with FHH are generally asymptomatic whereas NSHPT is a life-threatening neonatal disorder. Another

inherited human disorder of  $\text{Ca}^{2+}$  homeostasis is autosomal dominant hypocalcemia (ADH) caused by CaR overactivity (Pollak *et al.*, 1994). ADH patients demonstrate hypercalciuria that occasionally leads to formation of kidney stones (Brown, 1999). Thus, renal tubular transport mechanisms in FHH and ADH patients seem to manifest alterations in renal calcium handling, which suggest that the CaR present in their kidney tubules also exhibit increased set point (loss of function) or decreased set point (gain of function) identically to those present in parathyroid tissue CaR (Baum & Harris, 1998).



**Figure 3.3.**  $\text{Ca}^{2+}$ -sensitive receptor (CaR)-dependent regulation by extracellular  $\text{Ca}^{2+}$  ( $\text{Ca}^{2+}_o$ ). CaR is depicted with a large extracellular domain, 7 transmembrane-spanning domains, and a cytoplasmic domain. Increases in  $[\text{Ca}^{2+}_o]$  activate CaR linked, by G proteins ( $\text{G}_i$  and  $\text{G}_q$ ), to inhibition of adenylyl cyclase (AC) and stimulation of phospholipase C (PLC). A net result of CaR-activation is an increase in intracellular  $[\text{Ca}^{2+}]_i$ , which results from mobilization of  $\text{Ca}^{2+}$  and influx of  $\text{Ca}^{2+}_o$  through voltage-insensitive channels.  $\text{Ins}(1,4,5)\text{P}_3$ , inositol 1,4,5-trisphosphate; DG, diacylglycerol;  $\text{PIP}_2$ , phosphatidylinositol 4,5-diphosphate. From Hebert & Brown, 1995.



**Figure 3.4.** Proposed model for integrating  $\text{Ca}^{2+}$ - $\text{Mg}^{2+}$  and water handling by the kidney via extracellular  $\text{Ca}^{2+}$ -sensing receptor (CaR). With physiological transient hypercalcemia, the CaR-mediated reduction in concentrating ability would provide a regulatory mechanism helping to promote excretion of increased delivery of  $\text{Ca}^{2+}$  and  $\text{Mg}^{2+}$  from the thick ascending limb (TAL) to the collecting duct in a more dilute urine, by that decreasing the risk of stone formation (from Hebert, 1997).

#### *Cadmium interference with cellular signalling/ $\text{Ca}^{2+}$ homoeostasis*

When it comes to the clinical symptoms of cadmium intoxication the knowledge is well-documented (discussed above). It is commonly believed that cadmium in its free form is responsible for the damage observed followed by heavy cadmium load (Nordberg, 1992). However, the mechanisms underlying cadmium-induced nephrotoxicity are largely unknown.

Cellular  $\text{Ca}^{2+}$  homoeostasis and  $\text{Ca}^{2+}$ -mediated functions are being increasingly recognized as sensitive and critical targets for the action of toxic metal compounds (Beyersmann & Hectenberg, 1997; Rossi, 1991). Due to its high affinity to proteins, cell membranes and other ligands, cadmium and other heavy metals can interact with cell surface receptors,  $\text{Ca}^{2+}$  influx channels and intracellular  $\text{Ca}^{2+}$  transport systems. Cadmium concentrations in the low micromolar range provoke the formation of  $\text{IP}_3$  in human skin fibroblasts (Smith, 1989), bovine chromaffin cells (Yamagami *et al.*, 1998) and neuroblastoma cells (Benters, 1997), causing a large transient hormone-like mobilization of intracellular  $\text{Ca}^{2+}$ , supporting that  $\text{Cd}^{2+}$  interferes with receptors responsible for  $\text{IP}_3$ -dependent  $\text{Ca}^{2+}$ -signalling, e.g. the CaR protein. Regarding plasma membrane  $\text{Ca}^{2+}$ -channels,  $\text{Cd}^{2+}$  is a well-known blocker of  $\text{Ca}^{2+}$  influx into cells (for reviews see Kiss & Osipenko, 1994). Voltage-operated  $\text{Ca}^{2+}$ -channels may be most sensitive to blockade by  $\text{Cd}^{2+}$  (Jones, 1998; Lansman, 1986). Once taken up, cadmium interferes with the functions of several enzymes and regulatory proteins involved in intracellular  $\text{Ca}^{2+}$  signalling. Cadmium interferes with ATP-driven  $\text{Ca}^{2+}$  transport systems in the plasma membrane and intracellular stores in intestinal and kidney epithelia (Schoenmakers, *et al.*, 1992; Verboost, 1987). Also,  $\text{Na}^+/\text{Ca}^{2+}$ -exchanger, which is abundant in the distal nephron, is inhibited by  $\text{Cd}^{2+}$  in fish intestines

(Schoenmakers *et al.*, 1992). The overall effect is that the  $\text{Ca}^{2+}$  extrusion capacity of the cell is reduced leading to a sustained rise in  $\text{Ca}^{2+}_i$ .

Disturbance of  $\text{Ca}^{2+}$  homeostasis resulting in modulation of various cell functions as  $\text{Ca}^{2+}_i$  is perhaps the most important second (and first) messenger in regulating cellular processes. It is, however, beyond the scope of this thesis to discuss in detail the importance of  $\text{Ca}^{2+}$  in cell signalling as the interest of this subject has been intense and widespread (for reviews see Berridge, 1997; Clapham, 1995). As mentioned above  $\text{Cd}^{2+}$  can interfere with  $\text{Ca}^{2+}$  metabolism at several steps modulating  $\text{Ca}^{2+}$ -homeostasis, which would lead to a wide-range of cellular events. For instance  $\text{Cd}^{2+}$  disrupts intercellular junctions in renal proximal epithelia cells, LLC-PK<sub>1</sub>, causing the transepithelial resistance to decrease (Prozialeck, 1991). In this regard, the findings that  $\text{Cd}^{2+}$  interferes with  $\text{Ca}^{2+}$  homeostasis may be physiologically relevant since  $\text{Ca}^{2+}$  plays a key role in the formation, maintenance and regulation of structural proteins (Cereijido *et al.*, 1998; Jovov, 1994). In addition,  $\text{Cd}^{2+}$  perturbs the  $\text{Ca}^{2+}$  metabolism in bone cells via activating PKC-dependent processes (Long, 1997). Moreover, as discussed above cadmium has been postulated to be involved in the pathogenesis of hypertension. Nevertheless, cadmium-induced hypertension of rats has demonstrated that the action of cadmium may be due to cytosolic  $\text{Ca}^{2+}$  mobilization of the erythrocytes rather than a direct cadmium effect (Erkilic *et al.*, 1996). Cadmium is also considered as a carcinogenic agent known to increase the expression of several protooncogenes in a variety of cells (for review see Beyersmann & Hectenberg, 1997). Even so the link between  $\text{Ca}^{2+}$ -homeostasis and proto-oncogene expression still needs to be elucidated. However, cadmium-induced expression of proto-oncogenes requires intracellular  $\text{Ca}^{2+}$  mobilization and occurs in part by PKC-dependent pathways (Matsuoka, 1995), which may in part explain the suggested carcinogenicity of cadmium.

Thus, many reported physiological effects upon  $\text{Cd}^{2+}$  exposure might go through the modulation of  $\text{Ca}^{2+}$ -homeostasis and because of cellular malfunctions, it may in severe cases lead to toxic events, e.g. it is well-known that  $\text{Ca}^{2+}_i$  play a significant role in the transduction of apoptogenic signals (Alison, 1995; Koudrine, 1998; Kroemer, 1995). In fact, some cytotoxic actions of  $\text{Cd}^{2+}$  might be due the induction of apoptosis caused by  $\text{Cd}^{2+}$ -mediated  $\text{Ca}^{2+}$ -mobilization (Koudrine, 1998). Hence, cellular malfunctions due to the disturbance of  $\text{Ca}^{2+}$  homeostasis seem universal and independent of cell types representing different tissues.

### 3.7. Interactions with Zinc

Zinc,  $\text{Zn}^{2+}$ , belongs to the same group of transition metals as  $\text{Cd}^{2+}$  and accordingly similar effects are expected. Contrary to  $\text{Cd}^{2+}$ ,  $\text{Zn}^{2+}$  at low concentrations is essential for cellular growth and differentiation (Abdel-Mageed & Oehme, 1990; Solomons, 1988). Several studies have proved that  $\text{Zn}^{2+}$  and related metals competitively decrease the cellular uptake of  $\text{Cd}^{2+}$ , thereby protecting cells from the toxic effect of this metal (Benters, 1997; Blazka, 1991; Blazka & Shaikh, 1992; Endo, 1996; Gachot & Poujeol, 1992; Goyer, 1997; Kimura *et al.*, 1996; King *et al.*, 1998; Templeton, 1990). Like cadmium, zinc also induces MT, in fact, zinc is the most abundant metal bound to MT allowing  $\text{Zn}^{2+}$  to be transferred among the body compartments where it is needed (Klaassen *et al.*, 1999). Apparently, the  $\text{Zn}^{2+}$ -mediated induction of MT play a minor role in Zn-protection of  $\text{Cd}^{2+}$ -toxicity as  $\text{Zn}^{2+}$  protects MT-null mice (do not express MT) against cadmium-toxicity, probably by displacing  $\text{Cd}^{2+}$  from Cd-MT (Tang *et al.*, 1998). Additionally, tolerance to cadmium cytotoxicity is induced by  $\text{Zn}^{2+}$  via MT-independent mechanisms, such as decreasing intracellular cadmium as well as MT-induction at the cell level in LLC-PK<sub>1</sub>-cells (Mishima *et al.*, 1997). At the cell surface,  $\text{Zn}^{2+}$  competitively inhibits  $\text{Cd}^{2+}$  evoked  $\text{Ca}^{2+}$ -release (Dwyer *et al.*,

1991; Smith, 1989; Yamagami *et al.*, 1998), thus potentially protecting against cadmium-mediated  $\text{Ca}^{2+}$  mobilization.

### 3.8. Proximal versus distal effects

As mentioned above cadmium is believed to exercise its nephrotoxic actions mainly at the proximal tubule. As also mentioned above, cadmium accumulation by proximal tubules results from uptake of inorganic cadmium and of other small cadmium complexes and of the cadmium-metallothionein complex. Because proximal tubules reabsorb the bulk of ultrafiltered cadmium, most studies of cadmium transport, accumulation and intracellular effects have focussed on this nephron segment. Consequently, only limited information regarding the toxicity, mechanisms, and regulation of cadmium uptake and transport by distal tubules is available. However, evidence for distal tubule toxicity suggests that cadmium may also act at this nephron site (Friedman, 1994). In addition, immunohistochemical localization of cadmium-induced MT in rat kidney revealed intense staining in the distal tubule, that was often more intense than in the proximal tubule (Tohyama, 1988; Zhang, 1995). Also, studies in kidney cell lines of proximal (LLC-PK<sub>1</sub>) and distal (MDCK) tubular origins exposed to cadmium demonstrated that not only the proximal cell line but also, however to a lesser extent, the distal cell line accumulated cadmium (Zhang, 1995). In an *in vivo* study, in cadmium-exposed rats, cadmium failed to induce hypertension but demonstrated increased urinary kallikrein excretion (Girolami, 1989)}, which predominantly originates from the distal nephron tubule (Vio & Figueroa, 1985). As mentioned above, the hypertensive effect of cadmium is questionable, however, kallikrein-excretion suggest that cadmium may display nephrotoxic effects at the distal nephron level. Hence, it seems likely that distal cadmium toxicity also qualitatively contributes to the overall nephrotoxic effects. However, it remains to be defined whether and how far distal cadmium toxicity contributes quantitatively to cadmium nephrotoxicity in general.

#### *Hormonal regulation of electrolytes in renal distal nephron*

Distal cadmium toxicity might play a physiological important role as disturbance of the function at this nephron site can lead to widespread consequences. The distal nephron and the collecting duct are the main sites for hormonal regulation of ion and water transport.

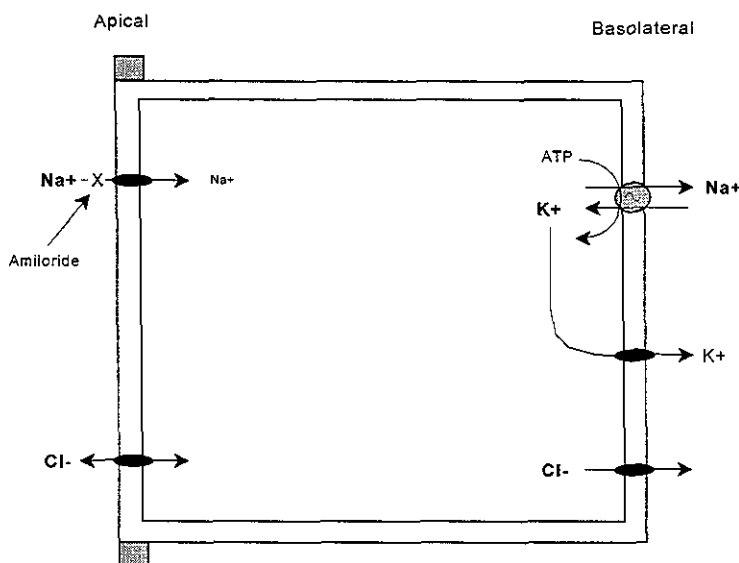
In general, there are two steps in the transepithelial ion movement across the distal (and other) epithelium. In  $\text{Na}^+$  absorption, one is the entry step of amiloride-sensitive ( $\text{Na}^+$ -channel blocker)  $\text{Na}^+$  across the apical membrane and the other is the extrusion step of  $\text{Na}^+$  across the basolateral membrane, which is referred to as the two-membrane model (figure 3.5). It is generally accepted that the entry of  $\text{Na}^+$  across the apical membrane is the rate-limiting step and that  $\text{Na}^+$  channels in the apical membrane play an important role as an entry site for  $\text{Na}^+$  regulated by hormones. The two main hormones controlling salt and water homeostasis are aldosterone and the antidiuretic hormone (ADH), respectively.

The aldosterone action on epithelial  $\text{Na}^+$  transport occurs at two different sites: 1) an activation of apical amiloride-sensitive  $\text{Na}^+$  channels (~1-4 h) and 2) an increase in the expression of basolateral  $\text{Na}^+$ - $\text{K}^+$ -ATPase (4h-2 days) (Paccolat *et al.*, 1987; Verrey, 1995). How aldosterone increases apical membrane  $\text{Na}^+$  entry in distal A6 cells is controversial since it is reported that aldosterone increases the probability of  $\text{Na}^+$  channels being open (Kemendy *et al.*, 1992) or increases the density of  $\text{Na}^+$ -channels (Helman, 1994).

Vasopressin, the mammalian antidiuretic hormone and vasotocin (AVT), its equivalent in amphibian and other vertebrates, are among the most important antidiuretics. In A6 cells AVT acts via the  $V_2$  receptor mainly located in renal collecting ducts, which activates AC resulting in an increase in cytosolic cAMP (Hays, 1996; Lang *et al.*, 1986). In A6 cells, vasopressin and cAMP increase the number of open apical  $\text{Na}^+$  channels, whereas cAMP increases the open probability of apical  $\text{Cl}^-$  channels (Chalfant, 1993; Nakahari & Marunaka, 1994) and thereby increases the reabsorption of water. Besides that vasopressin increases the water permeability of the apical membrane of the distal nephron leading to increased water absorption (Marunaka, 1997). The water permeability increases when vasopressin via  $V_2$  receptors mediates the transfer of water channels, aquaporins (AQP2), from a store in intracellular vesicles to the apical plasma membrane (Marples *et al.*, 1999).

Moreover, reabsorption of calcium in distal nephron segments is relatively modest, but it is physiologically regulated by PTH and is central to the renal component of calcium homeostasis (debated above). The presence of CaR in the distal tubule and scarcely in the proximal tubule (Hebert & Brown, 1995; Riccardi *et al.*, 1998) supports the idea that regulation and maintenance of  $\text{Ca}^{2+}$ -homeostasis is extra-proximal and that the distal tubule form an active part of the  $\text{Ca}^{2+}$ -regulating apparatus. The “sensing” mechanism seems to be exclusively at the blood side in the distal tubule as CaR has been recognized only at the basolateral membrane in this nephron segment (Riccardi *et al.*, 1998).

**Figure 3.5.** A two-membrane model of transepithelial  $\text{Na}^+$  transport in distal nephron. The apical  $\text{Na}^+$  channel has an amiloride-sensitive  $\text{Na}^+$  channel.  $\text{Cl}^-$  acts as a major counter ion.  $\text{Na}^+$  absorption is indirectly linked to  $\text{K}^+$  secretion driven by the basolateral  $\text{Na}^+-\text{K}^+-\text{ATPase}$ . Grey boxes at apical side indicate tight junctions.



Hence, in contrast to the proximal tubule cadmium-evoked disturbances in the distal tubule function may introduce widespread effects due to the importance of the distal nephron in regulating electrolyte and water levels in the organism. However, because of the nonspecific effects, identification of the origin in cadmium-mediated malfunctions of the distal nephron would probably be difficult.

### 3.9. A6 cell culture

Whether distal nephron segments accumulate or transport cadmium or whether they represent a site of cadmium-induced nephrotoxicity has received little attention. However, as pointed out



above, some studies have shown that cadmium accumulates in this nephron segment too. Since this part of the kidney is the main site for hormonal regulation of electrolyte and water transport, it is of main interest to explore the qualitative and quantitative effects of cadmium exposure to the distal tubule. In the present thesis the cultured toad kidney epithelial cell line A6 was used as this cell model exhibits morphological and functional properties of the mammalian distal epithelium (Perkins, 1981).

A6 cells were initially cultured from the kidney of the South African clawed toad *Xenopus laevis* (Rafferty, 1969). Under optimal conditions A6 cells grow rapidly with a doubling time of 24 h's in a log phase growth. Within 6-7 days A6 cells form a polarised, highly differentiated epithelium with a large transepithelial resistance,  $R_{te}$  ( $> 1000 \Omega \cdot \text{cm}^2$ ), and a large transepithelial potential (the basolateral surface being positive) of about 9 mV (Perkins, 1981). Dome formation, evidence of epithelium transport, is observed when cells are grown to confluence in culture flasks. Compared with mammalian cell cultures, the A6 cell line is more easy to handle, as this cell culture needs a humidified atmosphere with 5%  $\text{CO}_2$  at room temperature (optimal 25-27 °C). Because of the high  $R_{te}$ , A6 cells are excellent for investigation of ion transport because high  $R_{te}$  indicates that the paracellular route is negligible allowing only transepithelial transport to occur. Furthermore,  $R_{te}$  serves as a sensitive marker for determination of cell integrity since low levels of  $R_{te}$  may suggest that tight junctions are leaky or that the cell membranes are being destroyed.

A6 cells display active and electrogenic amiloride-sensitive  $\text{Na}^+$  absorption (Blazer-Yost & Helman, 1997; Rehn *et al.*, 1996; Sariban-Sohraby, 1983) and secrete  $\text{Cl}^-$  (Chalfant, 1993; Zeiske *et al.*, 1998) via two types of  $\text{Cl}^-$ -channels controlled by  $\text{Ca}^{2+}$  and/or cAMP (Marunaka, 1990). Moreover, A6 cells (Chalfant, 1993) are for instance sensitive to PTH (Rodriguez-Commes, 1995), aldosterone (Bindels, 1988; Helman, 1994; Helman, 1995) and the diuretic hormone (Bindels, 1988; Verrey, 1993; Verrey, 1994). Therefore, this renal cell line provides an excellent model for distal tubular cells in the kidney that is useful in studies attempting to characterize mechanisms of epithelial transport and hormone action.

### 3.10. Purpose of the studies

The aim of the presented work was to gain further knowledge of the mechanism by which  $\text{Cd}^{2+}$  acts on the distal renal epithelia A6 cells with special emphasis on the effects when applied to the basolateral surface of the epithelium and to evaluate possible concomitant cytotoxicity. Additional work, in some cases carried out in cooperation with students, that is not published or put into manuscripts will also be presented and discussed according to the relevance of the subject in this thesis. The following aspects were studied in detail:

- The cytotoxicity of  $\text{Cd}^{2+}$  when applied at both surfaces of A6 cells
- Cadmium-evoked transepithelial ion transport measured by the short-circuit-current technique and the exploration of the ion transport behind.
- $\text{Cl}^-$  secretion in A6 cells by  $\text{Cd}^{2+}$  and related divalent metals with special emphasis on the involvement of  $\text{Ca}^{2+}$ -mobilization.
- The effects of  $\text{Cd}^{2+}$  on intracellular  $\text{Ca}^{2+}$ , interaction between related divalent metals and studies of mechanisms behind with special emphasis on  $\text{Cd}^{2+}$  as a potential CaR-agonist.
- The effect of  $\text{Cd}^{2+}$  on ADH-exposed A6 cells and possible intracellular mechanisms.
- Additional results obtained with A6 cells; 1) effect of  $\text{Cd}^{2+}$  on  $\text{Na}^+/\text{K}^+$ -ATPase activity, 2)  $^{109}\text{CdCl}_2$  studies, 3) multi-drug resistance experiments, 4) confocal laser microscopy experiments, 5) the effect of the anti-tumour agent, cisplatin, on ion transport capacity.

## 4. METHODS

For particular methods, reference is made below to the relevant article/manuscript using its number in Roman numerals. Methods not presented in articles/manuscripts attached to the section “additional experiments” in Results, yet too important to be excluded, will be presented using the notion: → results.

### 4.1. Cell culture and culture methods

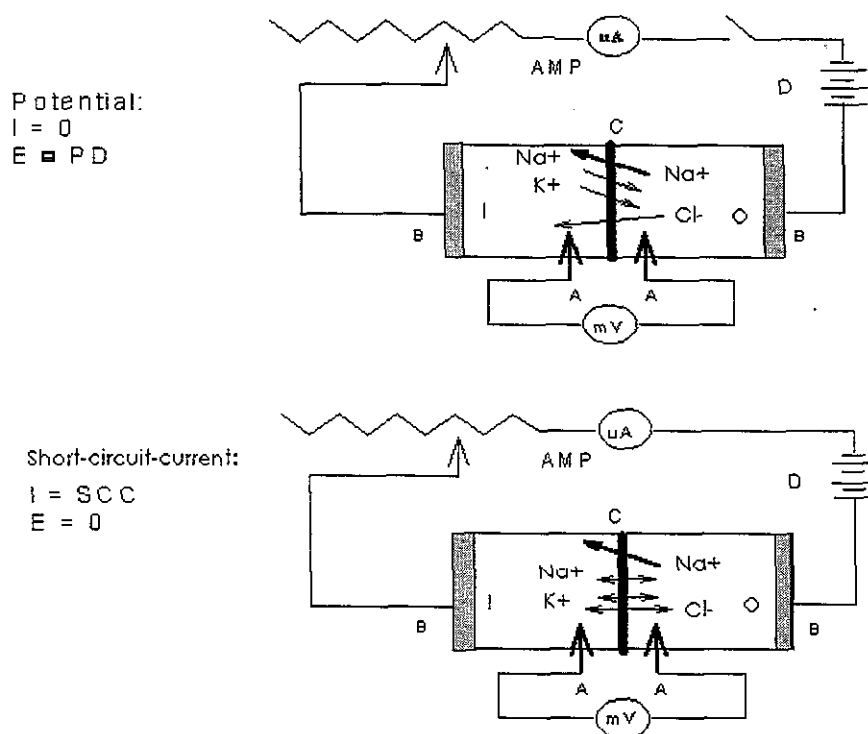
A6 cells, a line derived from the distal tubule of *Xenopus laevis* kidney, were purchased from the American Type Culture Collection (Rockville, MD, USA), at serial passage 67. Cytotoxic experiments (I & II), ADH-experiments (III) and cisplatin experiments (IV) were conducted at passages 70-80, whereas fluorescence experiments (VI & VII) were conducted with cells at passages 80-113 (for exact cell passages please refer to the articles/manuscripts in the appendices). Cells were grown at 26°C in a humidified atmosphere of 5% CO<sub>2</sub> in air in plastic culture flasks (25 cm<sup>2</sup>, Costar, Northumbria Biologicals, Cramlington, Northumbria, UK) with 10 ml of Dulbecco's modified Eagle's medium, DMEM, (Gibco, Grand Island, NY, USA) adjusted with 20% distilled water to an osmolarity of 225-255 mOsm/kg, which is appropriate for amphibian cells (Perkins, 1981). The medium was supplemented with 100 IU/ml penicillin, 100 µg/ml streptomycin, and 10% (v/v) fetal bovine serum (Gibco). Twice a week the growth medium was replaced with a fresh medium. When cells were confluent and exhibited dome formation (5-10 days), they were subcultured by incubation in 2 ml Ca<sup>2+</sup>-Mg<sup>2+</sup>-free amphibian salt solution with 0.25% (w/v) trypsin containing 110 mM NaCl, 2.5 mM NaHCO<sub>3</sub>, 3 mM KCl, 1 mM KH<sub>2</sub>PO<sub>4</sub>, 1 mM EGTA and 5 mM glucose (pH 7.6). Upon the detachment from the culture flask (3-5 minutes), the subculture medium was removed. Five to ten minutes later, the effect of trypsin was neutralized by adding 5 ml culture medium. The cells were resuspended and used for experiments.

### 4.2. Electrophysiological measurements

Cells were seeded onto membrane inserts in snap wells (Transwell, 1 cm<sup>2</sup>, 0.45 µm poresize, Costar) at a seeding density of about  $\frac{1}{2} \cdot 10^6$  cells/well. The cells were supplemented with growth medium for 7-8 days to obtain confluent monolayers. The ion transport capacities were improved by preincubation of the epithelia with 1 µM aldosterone 24 hours before performing the experiments (Bjerregaard, 1992). Active transepithelial ion transport was measured as  $I_{sc}$  according to the technique of Ussing and Zerahn (figure 4.1) (Ussing, 1953). Briefly, active transepithelial ion transport was studied on monolayers of cells mounted in a modified Ussing chamber bathed from both sides in aerated normal Ringer solution (NRS) as described below and kept at room temperature. Each half-chamber housed a potential-sensing KCl-electrode (agar bridge saturated with KCl) and an Ag-AgCl current passing electrode. All electrodes were connected to a multichannel Voltage/Current Clamp amplifier (WPI EVC-4000) enabling one to measure the potential difference and  $I_{sc}$  across the monolayer. Conductance ( $G_{te}$ ) was determined at defined intervals by passing a 10-mV pulse of 3 sec durations. The  $I_{sc}$  and  $G_{te}$  were continuously recorded on a strip-chart recorder. Cell integrity was assessed by monitoring the transepithelial resistance ( $R_{te}$ ) giving that  $G_{te}$  equals  $1/R_{te}$ .

*Data handling:* The time of basolateral addition of 1 mM CdCl<sub>2</sub> to the time when  $R_{te}$  started to decrease markedly was about 40 minutes (article I). Therefore, to assure that cell integrity during

$I_{sc}$ -experiments was not influenced by  $Cd^{2+}$ , all experiments were terminated within 40 minutes after addition of  $Cd^{2+}$ . The increase in  $I_{sc}$  ( $\Delta I_{sc}$ ) was calculated as the difference in  $I_{sc}$  before addition of the agent and the steady or maximal  $I_{sc}$  level reached after addition of the agent. At least one monolayer from the same plating served as control for the other monolayers.



**Figure 4.1.** Short-circuit-current setup showing potential (top) and short-circuit-current (bottom) mode: A; agar bridges saturated with KCl, B; Ag-AgCl current passing electrodes, C; monolayer of confluent cells, D; Voltage source (voltage/current amplifier), I; the inner side of monolayer, O; the outer side of monolayer.

### 4.3. Epithelial function studies

Cells were grown on snap wells until confluence. In some experiments (II & IV) the integrity of cell-cell junctions was assessed by monitoring  $R_{te}$  as described above. Short-term effects were estimated by adding a fixed concentration of a test-agent to the basolateral side of the monolayer upon which successive  $R_{te}$ -measurements was performed. Long-term effects (24 hours) were estimated by determination of the half maximum inhibition concentration ( $IC_{50}$ ) by increasing the concentration of test agents added to serum-free medium (73 % DMEM, 25 % milli-pore water and 2 % penicillin/streptomycin) on either the basolateral or apical sides of A6 monolayers. The cells were not pre-incubated in aldosterone as for electrophysiological measurements. After 24 hours,  $R_{te}$  was measured using an epithelium-volt-ohmmeter with chopstick electrodes (Millicell-ERS).

**Data handling:** The results were calculated as  $\text{ohms}\cdot\text{cm}^2$  of cell growing surfaces, after subtracting the values for the resistance measured in cell-free filter inserts. The results were expressed as percentages of the control values (no Cd exposure) taking into account the changes in control levels within 24 hours, and % control was calculated as  $R_{te,24h}/\text{corrected } R_{te,control}$  for each dose. Corrected  $R_{te,control}$  was expressed as  $R_{te,control, \text{time}=24 \text{ hours}}/R_{te,control, \text{time}=0 \text{ hours}}$  in untreated

cells.  $IC_{50}$  tests were performed with cells of the same passage.  $IC_{50}$  values were calculated by intrapolation of the % inhibition-concentration relationship at 50% inhibition of  $R_{te}$ . The  $IC_{50}$  tests were obtained from cells of the same passage.

#### **4.4. Morphological observations**

In cisplatin experiments (IV) electrochemical functional studies were supplemented with morphological observations to picture the cytotoxic effect of cisplatin on A6 cells. Subcultured cells were seeded in petri dishes containing either 0, 200 or 400  $\mu$ M cisplatin dissolved in NaCl-Ringer and exposed for 1, 3, 6, 24, 48 and 75 hours before evaluation. Morphological changes were examined in a Leica microscope at 200 or 400  $\times$  magnifications using the following criteria to distinguish effects of cisplatin; cell division, formation of pseudopodia and sheets of cells. The effects were compared with effects of control cells unexposed to cisplatin, but otherwise treated in same manner.

#### **4.5. Protein determination**

For determination of protein concentrations, a commercial kit purchased from Bio-Rad (Cat. # 500-0007) based on the method of Bradford (1976) was used. It involves the addition of an acidic dye to protein solution, and subsequent measurement at 595 nm using a micro plate reader (Elisa reader, Inter Med. Tim-2000). Bovine serum albumin was used as standard. The cells were degraded by adding 0.5 M NaOH for minimum 2 minutes after which 0.5 M HCl was added to neutralize the protein solution before the protein content was determined.

#### **4.6. Measurements of cAMP, adenylate cyclase & phosphodiesterase activity**

In some experiments (III & IV) cAMP content, activity of adenylate cyclase (AC) and phosphodiesterase (PDE) were measured in A6 cell homogenates as described in the following. Suspended epithelial cells were homogenised at 0-4 °C in a glass homogeniser with 2 ml of 10 mM Tris-HCl buffer (pH 7.5), containing 0.1 mM  $CaCl_2$ . The homogenate was centrifuged at 20,000 g for 30 minutes. The supernatant was used to measure PDE-activity and the pellet (composed of cell membranes) was resuspended in 1 ml of 5 mM Tris-HCl (pH 7.5) containing 0.25 M sucrose for measurement of AC-activity. Both suspensions were stored at -80 °C until use. The activity of AC was measured in a reaction mixture with a final volume of 500  $\mu$ l, containing 150 mM N-morpholinopropane sulphonic acid (MOPS), 83 mM Tris-HCl, 10 mM theophylline, 2 mM  $MgCl_2$ , 1 mM EGTA, 1 mM dithiothreitol and membrane preparation (60-90  $\mu$ g protein). The assay mixtures with cadmium or cisplatin, agents and membrane preparations (30-50  $\mu$ g protein) were pre-incubated at 30 °C for 5 minutes. The assays were started by the addition of 1 mM ATP. The reactions were allowed to proceed at 30 °C for 20-30 minutes, and stopped by boiling the incubates for 3 minutes, whereupon they were centrifuged at 2000 g for 20 minutes at 4 °C. The content of cAMP in the supernatant was determined using a protein binding assay, by displacement of radioactive cAMP, as described by (Geisler *et al.*, 1977). The activity of "warm" cAMP was determined on a liquid scintillation counter, Wallack model 1409.

The activity of PDE was measured in a mixture with a final volume of 500  $\mu$ l containing, at final concentrations: 40 mM Tris-HCl, 10mM  $MgCl_2$  and 1 mM dithiothreitol (pH 8.0). The assay mixtures with test agents and the cytoplasmic preparations (50-100  $\mu$ g protein) were pre-incubated at 30°C for 5 minutes. The assay was initiated by adding 1  $\mu$ M cAMP, and stopped

after 30 minutes by boiling the incubates for 3 minutes. The incubates were centrifuged at 2000 g for 20 minutes at 4°C and the content of cAMP in the supernatant was determined, as noted above. The PDE-activity was measured as the theophylline (10mM)-sensitive decomposition of cAMP.

#### 4.7. Measurements of Na<sup>+</sup>-K<sup>+</sup>-ATPase activity using nystatin

*In vitro* measurements of Na<sup>+</sup>-K<sup>+</sup>-ATPase activity was performed in intact A6 cell monolayers using, nystatin (experiment IV and additional experiments → results). Nystatin, known as an ionophore, can be used to determine the Na<sup>+</sup>-K<sup>+</sup>-ATPase activity since apical nystatin mediates a passive entry of Na<sup>+</sup> down its electrochemical gradient at the apical membrane (Wills, 1981). Charge transfer across the basolateral membrane is achieved through the basolateral Na<sup>+</sup>-K<sup>+</sup>-ATPase Pump (active contributions of ions as the system is in I<sub>sc</sub>-mode). Thus, if it is assumed that nystatin reduces the resistance of the apical membrane, I<sub>sc</sub> becomes a function primarily of the transport capacity in the basolateral membrane, i.e. the Na<sup>+</sup>-K<sup>+</sup>-ATPase pumps. Nystatin was dissolved in ethanol and had an activity of 300 U/ml.

*Data handling:* The amplitude of I<sub>sc</sub> when nystatin ( $\Delta I_{sc(Nys)}$ ) is added apically to the monolayers is proportional to the activity of Na<sup>+</sup>-K<sup>+</sup>-ATPase. Ouabain-pretreated (a specific inhibitor of Na<sup>+</sup>-K<sup>+</sup>-ATPase) monolayers were used to decide the lowest  $\Delta I_{sc(Nys)}$  ( $\Delta I_{sc(ouabain)}$ ) obtainable due to the specific inhibition of Na-K-ATPase.  $\Delta I_{sc(ouabain)}$  was subtracted all  $\Delta I_{sc(Nys)}$ -values to allow measurement of ATPase-sensitive activity only. The pump activity was calculated by determining the fraction of ouabain-corrected  $\Delta I_{sc(Nys)}$  with and without a test-agent present.

#### 4.8. Measurements of Cd<sup>2+</sup> accumulation in cell suspensions using <sup>109</sup>CdCl<sub>2</sub>

The extend of Cd<sup>2+</sup> accumulation in A6 cells exposed to basolateral Cd<sup>2+</sup> was roughly estimated by using the radioactive isotope, <sup>109</sup>Cd<sup>2+</sup> (Du Pont, 9.94 MCi/ml, New Life Science products, Belgium)(additional experiments → results). The procedure was as follows: Cell suspension was washed 2 times in NRS (composition stated below) containing 5 mM glucose (NRS-Glu). 400 µl <sup>109</sup>Cd<sup>2+</sup>-stock solution (1 mM CdCl<sub>2</sub> containing 5 µCi <sup>109</sup>CdCl<sub>2</sub>) was added to 1 ml cell suspension achieving a final concentration of 400 µM Cd<sup>2+</sup> and 2 µCi <sup>109</sup>Cd<sup>2+</sup>/ml. Next, the cell suspensions were exposed for ½, 5, 15, 30 and 60 minutes, respectively. At the pre-requested time, 100 µl EGTA (50 mM in milli-pore water) was added and the suspension was washed twice in 500 µl MOPS-EGTA solution (125 mM NaCl, 5 mM KCl, 1 mM MgCl<sub>2</sub>, 3 mM EGTA and 10 mM MOPS, pH 7.4) at 800 g for two minutes. The cells were then lysed in 500 µl milli-pore water or by ultrasound. The lysate was fractionated by centrifugation at 20.000 g for 20 minutes at room temperature. 400 µl supernatant was decanted for isotope readings in a γ-counter and a small aliquot was taken for protein determination. Likewise, the pellet was resuspended in 500 µl milli-pore water for γ-counting and a small aliquot was taken for protein determination.

*Data handling:* The accumulation of Cd<sup>2+</sup> was calculated from the sample counts using the specific activity of the <sup>109</sup>Cd<sup>2+</sup>-stock solution. Thus, when the activity of the stock solution is known (cpm/ml), the amount of “warm” <sup>109</sup>Cd<sup>2+</sup>-solution is known (here: 400 µl), the final concentration of Cd<sup>2+</sup> (here: 400 µM), the molar activity can be calculated having the unit's cpm · nmol<sup>-1</sup> · ml<sup>-1</sup>. From the molar activity, the sample count and protein content of supernatant/pellet

the specific activity,  $\text{pmol} \cdot \text{mg}^{-1}$  can be calculated. Finally, all specific activities were expressed as fraction of control values of cell suspension not exposed to  $^{109}\text{Cd}^{2+}$ .

#### 4.9. Assessment of multi-drug-resistance activity in A6 cells

Qualitative determination of the transport of  $\text{Cd}^{2+}$  was attempted using the  $\text{Cd}^{2+}$ -specific fluorescence probe, APTRA-BTC/AM (Molecular Probes, Leiden, NL)<sup>1</sup>. The loading of the probe was, however, unsuccessful due to lack of sensitivity of the probe.  $\text{Cd}^{2+}$  binds to a variety of cellular components reducing the intracellular concentration of free cadmium below the sensitivity level of APTRA-BTC ( $k_d = 1 \mu\text{M}$ ). The quantitatively most important factor contributing to the lack of sensitivity of APTRA-BTC, was most likely the presence of multi-drug resistance (MDR) activity in A6-cells, which is responsible for the extrusion of the probe from the intracellular milieu. So far, the results indicate that APTRA-BTC serves as an excellent marker for MDR-activity in A6-cells (additional experiments  $\rightarrow$  results), however, due to ongoing investigations of patent possibilities this subject will only be discussed briefly: Cells were cultured and processed as described previously. *In  $\text{Cd}^{2+}$  transport experiments*, 4 ml cell suspensions were washed in DMEM and then resuspended in 4 ml NRS-Glu. Prior to the loading of cells, APTRA-BTC/AM was mixed 1:1 with pluronic acid, a mild nonionic surfactant (Molecular Probes, Leiden, NL), to increase uptake of the dye. The final concentration of APTRA-BTC/AM:pluronic acid was  $5 \mu\text{M}$ . After 60 minutes loading on a rocking device, the isolated cells were washed twice in NRS-Glu (1000 rpm for 1 minute). Aliquots of  $500 \mu\text{l}$  were decanted for measurements in a Perkin Elmer LS50B luminescence spectrophotometer at excitation wavelengths 380 and 460 nm and at emission wavelength 500 nm with a sampling rate of 3.5 seconds. *In MDR-experiments*, 2 ml cell suspensions were washed once in NRS-Glu and then resuspended in  $300 \mu\text{l}$  NRS-Glu.  $2 \times 5 \mu\text{l}$  was decanted for protein determination. The rest was transferred to a quartz cuvette for measurements in a Perkin Elmer LS50B luminescence spectrophotometer (apparatus setups like transport experiments). The following agents were used to depress the MDR-activity: sulfinpyrazone, 50 mM and probenecide, 250 mM, both dissolved in NRS with NaOH, then adjusted to pH with HCl, and verapamil, 100 mM were dissolved in ethanol and then diluted with NRS to 1 mM.

The viability of the cells upon treatment with MDR-suppressors was assessed by the trypan blue dye exclusion test incubating  $50 \mu\text{l}$  cells with  $50 \mu\text{l}$  trypan blue for 10 minutes. Under the given conditions, no cells were stained meaning that the MDR-inhibitors at the used concentrations were nontoxic for the cells.

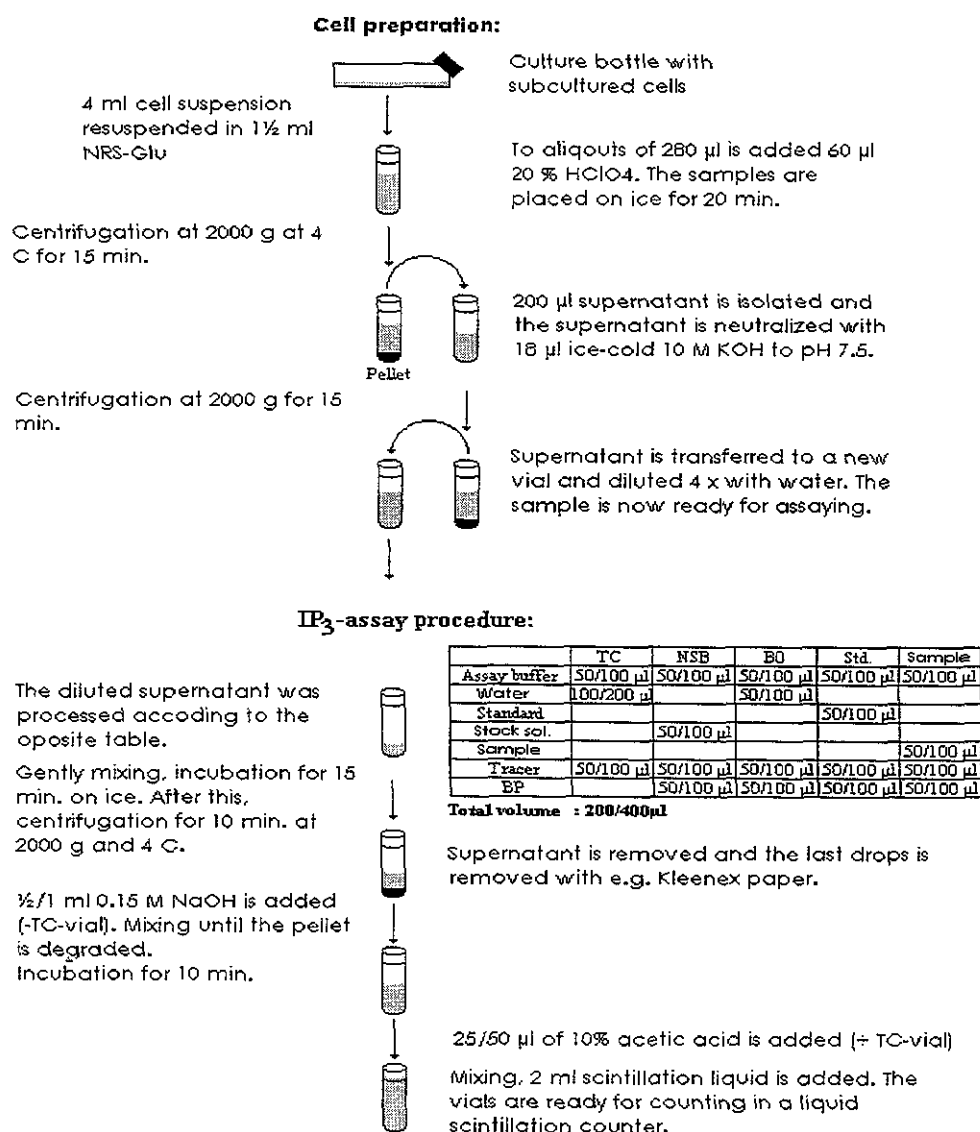
*Data handling:* When  $\text{Cd}^{2+}$  and APTRA-BTC/AM are added to the cell suspension MDR-activity results in a steady increase in fluorescence. The effects of MDR-suppressors were assessed by determining the slope of  $\text{Cd}^{2+}$ -mediated fluorescence increases at control conditions and then comparing that to the slopes at increasing concentrations of MDR-suppressors. The effects were expressed by the  $\text{IC}_{50}$ -level.

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<sup>1</sup>APTRA-BTC/AM is cell permeable due to the attached hydrophobic AM (acetomethyl)-group. When passing the cell membrane, AM group is hydrolysed by esterases resulting in hydrophilic non-permeable form, APTRA-BTC that is sensitive to  $\text{Cd}^{2+}$ . APTRA-BTC is a dual-wave indicator, i.e. binding of  $\text{Cd}^{2+}$  shifts the excitation maximum from 380 to 420 nm, which can be detected by a fluorescence spectrophotometer.

#### 4.10. $IP_3$ -binding studies

Usually, 8 ml cell suspensions were centrifuged and resuspended in 3 ml NRS-Glu. Then the cell suspension was divided into 10 parts of 300  $\mu$ l upon which the experiments were executed. The A6 cells were subcultured as described above and  $0.8 \cdot 10^6$  cells/300  $\mu$ l were prepared according to the guidelines given for the assay system (Kit: TRK 1000) purchased from Amersham (Life Science, UK). Shortly, 300  $\mu$ l cell suspensions were mixed with 0.2 volumes ice-cold 20% perchloric acid, and incubated on ice for 20 minutes. 20  $\mu$ l was taken for protein determination (see flow-diagram 4.1). The cell suspension was then centrifuged at 2000 g for 15 min. at 15°C whereupon the supernatant was decanted into plastic tubes and neutralized with ice-cold 10 M KOH to pH 7.5. Finally, the neutralized supernatant was diluted 4  $\times$  in milli-pore water before running the assay.



**Flow-diagram 4.1.** A schematic overview of cell preparation and assaying for determination of  $IP_3$  in A6 cell suspension. The cell preparation and assay procedure have been optimized to halves the volumes of what recommended in the commercial kit (Amersham, Kit: TRK 1000). Abbreviations: TC, total count; NSB, nonspecific binding; BP, binding protein B0;  $B_0$  - maximum  $^3IP_3$ -binding to BP.

The principle behind the assay is that unlabelled  $\text{IP}_3$  competes with a fixed amount of [ $^3\text{H}$ ]-labelled  $\text{IP}_3$  for a limited number of bovine adrenal  $\text{IP}_3$  binding proteins. The bound  $\text{IP}_3$  is then separated from the free  $\text{IP}_3$  by centrifugation. The free  $\text{IP}_3$  in the supernatant is discarded by simple decantation, leaving the bound fraction adhering to the tube. The amount of unlabelled  $\text{IP}_3$  in the sample is calculated from a standard curve using the  $^3\text{H}$  counts. Nonspecific binding measured in the presence of 1 nM  $\text{IP}_3$  was typically 10% of the total count. Specific binding was typically 30 % of the total count. Moreover, the used concentration of  $\text{CdCl}_2$  did not affect the binding capacity of the binding protein.

*Data handling:* Data were analysed by computer assisted curve-fitting to a logistic equation, which together with the protein content allowed calculation of the specific  $\text{IP}_3$ -content as pmol  $\text{IP}_3/\text{mg}$  protein. Pilot experiments indicated that the  $\text{IP}_3$ -content of control cells did not change significantly during a typical time course of experiment, i.e. 60 sec of exposure.

#### **4.11. Measurements of chloride transport**

##### *Optical measurements*

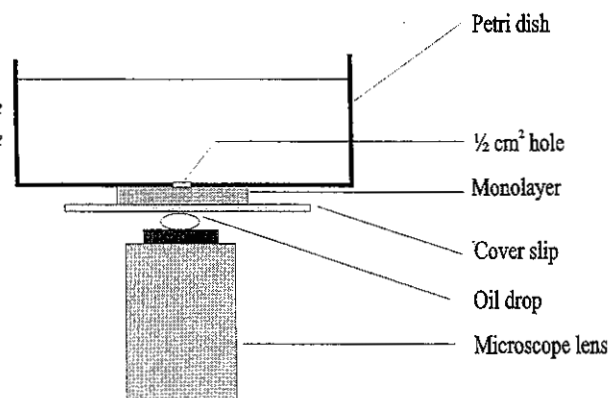
A method for determination of  $\text{Cl}^-$  secretion in single cells using a laser confocal microscope was developed during a four months stay at Giessen Universität, Germany. Due to lack of time the method was never validated and as such results are not presented in the current thesis. In the following the method is described shortly: A6 cells with a final density of 20.000 - 30.000/ $\text{cm}^2$  were grown on filters with low autofluorescence (Costar, 0.4  $\mu\text{M}$ ). 7-8 days later, a small piece of the filter containing subconfluent cells was isolated and then glued with silicone around a  $\frac{1}{2}$   $\text{cm}^2$  opening in a 4-ml plastic chamber with the basolateral side facing the chamber volume and the apical side facing an inverted microscope attached to a confocal laser device (MRC 1024, Biorad, Hemel Hempstead, UK).  $\text{NaCl}$ -Ringer in the bathing solution was substituted by  $\text{Na}_2\text{SO}_4$ -Ringer. A 20  $\mu\text{l}$  drop of  $\text{Cl}^-$ -free Ringer was placed on the apical side where upon a normal objective cover glass was fixed (figure 4.2). The basolateral chamber contained 3 ml  $\text{Cl}^-$ -free Ringer. During experiments test agents in adequate amounts were added. Settings of laser power and emission filters were 3% and 455/30 nm (filter blocks; UBHS and E2), respectively. The fluorescence  $\text{Cl}^-$ -sensitive dye 6-methoxy-N-(sulfoethyl)quinolinium ( $\text{SPQ}^2$ , Molecular Probes) at 10 mM was added to the solution on both sides of the monolayer to detect  $\text{Cl}^-$ -transport. Because  $\text{SPQ}$  is highly polar and membrane impermeable, measurements were limited to the extracellular face. Area around the cells where pointed out by the software and  $\text{Cl}^-$ -transport was measured as the decline in fluorescence intensity at 450 nm emission caused by the quenching effects of  $\text{Cl}^-$  on  $\text{SPQ}$ . Cells were also pointed out but because of  $\text{SPQ}$ 's impermeable features no quenching should occur. The kinetics were evaluated by software provided by Biorad. Figure 4.3 illustrates a typical photo of cell clusters achieved with the confocal laser microscope

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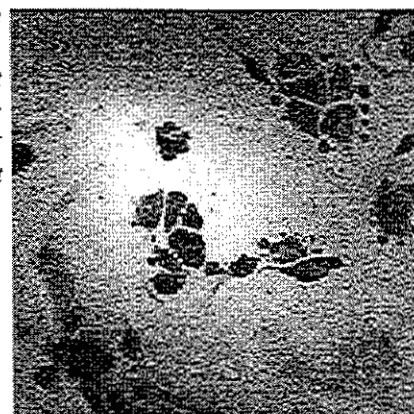
<sup>2</sup> $\text{SPQ}$  is a hydrophilic single-wave indicator that is quenched by halides resulting in an ion concentration-dependent fluorescence decrease without a shift in wavelength (emission = 443 nm and excitation = 344 nm). The efficiency of the quenching process is represented by the Stern-Volmer quenching constant ( $K_{sv}$ ), which is reciprocal to the ion concentration that produces 50 % of maximum quenching.



**Figure 4.2.** Arrangement of optical experiments (see text for further details). The Apical side is facing the microscope lens attached to a laser device.



**Figure 4.3.** A photo of a typical SPQ-experiment achieved with the confocal laser microscopy at 3 % laser power and 400 x magnification. SPQ was added to the apical and basolateral solution at 10 mM to detect Cl<sup>-</sup>-transport across the cell membrane. Cl<sup>-</sup>-transport was measured as the decline in fluorescence intensity at 450 nm emission caused by the Cl<sup>-</sup> mediated quenching effects of SPQ. Cell clusters are dark and the bright area is caused by the laser beam itself.

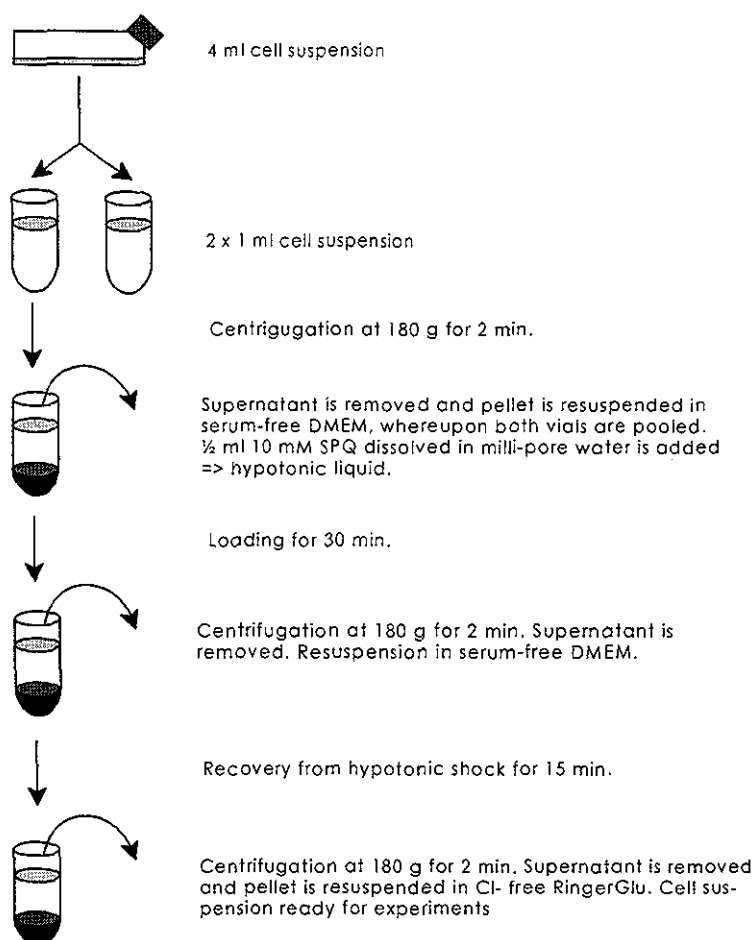


#### Fluorescence measurements

In some experiments (VI) the fluorescent probe SPQ was used to monitor intracellular chloride concentrations. About  $2 \cdot 10^6$  cells 4-8 days of age suspended in growth medium were centrifuged for two minutes at 180 g. The growth medium was removed and the cells were resuspended in serum free DMEM. The cell suspension was incubated 30 minutes at room temperature with 10 mM SPQ in a hypotonic solution (Cl<sup>-</sup>-containing Ringer/H<sub>2</sub>O 1:1) as described by Pilas & Durack (1997). After loading, the cell suspension was centrifuged for 2 minutes at 180 g and resuspended for 15 minutes at room temperature in serum free DMEM to allow recovery from hypotonic shock. Just before being analysed the cells were washed once in Cl<sup>-</sup>-free Ringer and then placed in a quartz cuvette (for further details see flow diagram 4.2).

The emission spectra and chloride-specific quenching characteristics of SPQ in Cl<sup>-</sup>-free Ringer were measured at 344 nm excitation wavelengths (slit width 2.5 nm) as shown in figure 4.4A. The final concentration of SPQ used was 1  $\mu$ M. The chloride concentration varied from 0 to 200 mM. The emission wavelength was set at 443 nm (slit width 2.5 nm) during all SPQ-experiments. A maximal intensity of fluorescence ( $F_0$ ) was determined at the end of each experiment by adding 1 % (v/v) triton X-100 to the cuvette. The fluorescent intensity was measured at 20 ms intervals. Autofluorescence of the chemicals used and cells not loaded with SPQ were also measured and subtracted from all test-values. To calculate intracellular [Cl<sup>-</sup>], a

calibration curve was established by increasing the  $\text{Cl}^-$  concentration in  $\text{Cl}^-$ -free Ringer containing  $10 \mu\text{M}$  SPQ (figure 4.4B). From the slope of the linear plot, the Stern-Volmer quenching constant (Biwersi *et al.*, 1992),  $K_{sv}$ , was determined to be  $125.4 \pm 7.1 \text{ M}^{-1}$  ( $n = 5$  and  $R = 1.00$ ). Experiments with the same protocol were conducted on different cell passages to take into account the effect of biological variation.

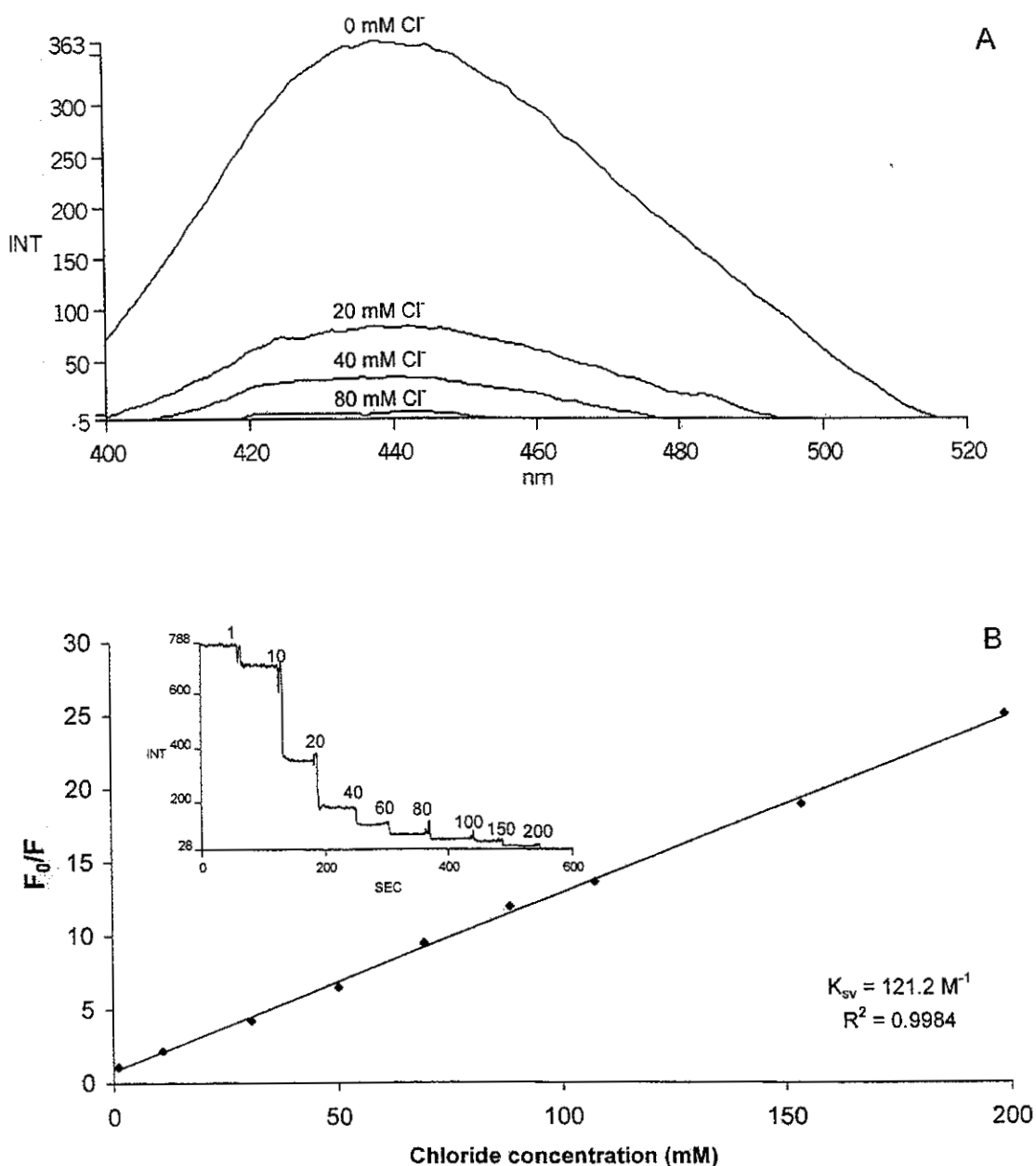


**Flow diagram 4.2.** An overview of cell preparation and loading of SPQ to detect  $\text{Cl}^-$ -secretion in A6 cells.

**Data handling:** Relative rates of  $\text{Cl}^-$ -transport computed from the time course of intracellular fluorescence were expressed as relative fluorescence variation using  $(\Delta F/\text{dt})/F_0$ , where  $(\Delta F/\text{dt})$  represents the change in intensity upon addition of an agent and  $F_0$  the maximal intensity in presence of triton X-100. Data were also expressed as the change in  $\text{Cl}^-$  concentration pr. minute ( $[\Delta \text{Cl}^-]$ ). Calculations of chloride concentration were performed according to equation 4.1. (Biwersi *et al.*, 1992):

**Eq. 4.1.**

$$K_{sv} \cdot [\text{Cl}^-] = \left( \frac{F_0}{F} \right) - 1$$



**Figure 4.4.** *A*; shows the quenching of SPQ fluorescence emission by increasing concentrations of Cl<sup>-</sup>. SPQ (1  $\mu$ M) was dissolved in Cl-free Ringer and scans between 400 and 600 nm were performed on a luminescence spectrophotometer exciting at 344 nm. *B*; shows the Stern-Volmer plot for fluorescence quenching of SPQ (10  $\mu$ M) by increasing concentrations of Cl<sup>-</sup> in chloride free Ringer. The results are expressed as fluorescence ratio  $F_0/F$  where  $F_0$  represents the maximal intensity and  $F$  the change in intensity upon addition of an increasing concentration of Cl<sup>-</sup>. The slope of the linear plot is the Stern-Volmer quenching constant,  $K_{SV}$ , (see materials for further details). Inserted: a time course of SPQ-quenching by chloride (number above curve indicate Cl<sup>-</sup> concentration given in mM).

#### 4.12. Measurements of intracellular calcium

All experiments (VII) were performed with A6 cells isolated after 4-8 days of growth. To monitor intracellular calcium concentrations, the fluorescent probe Fura-2/AM<sup>3</sup> (Molecular Probes, Leiden, NL) was used. Prior to the loading of cells the dye was mixed 1:1 with pluronic acid to increase the dye-uptake (see above). Isolated cells suspended in DMEM were loaded with 500  $\mu$ M Fura-2/AM on a rocking device at room temperature for 30 minutes covered in aluminium foil. Ten minutes before end of loading, 50  $\mu$ M TPEN (tetrakis-(2-pyridylmethyl) ethylenediamine) and 5 mM probenecide were added to the cell suspension. TPEN is known as a membrane permeant chelator with extremely high affinity for heavy metals (Hinkle, 1992; Richardson & Taylor, 1993) and 5 mM probenecide is capable of inhibiting the organic anion-transporter responsible for the efflux of the dye (Di Virgilio *et al.*, 1988; Di Virgilio *et al.*, 1990; McDonough & Button, 1989; Mitsui *et al.*, 1993). For further details about this topic please refer to manuscript VII. After the loading, a small volume of isolated cells (about  $\frac{1}{2} \cdot 10^6$  cells per experimental datum) was washed and resuspended three times (two minutes at 180 g) in NRS under gentle stirring in a plastic tube (see flow diagram 4.3).  $\text{Ca}^{2+}$ -free experiments were performed by replacing NRS with  $\text{Ca}^{2+}$ -free Ringer solution during the last washing of the cells. All experiments were executed in a quartz cuvette with a total sample volume of 500  $\mu$ l containing 5 mM probenecide. Preliminary studies revealed that probenecid at the used concentration did not damage the cells during the time course of the experiments. Also, probenecid did not influence the basal level of  $\text{Ca}^{2+}_i$ . The excitation wavelength was set to alternate between 340 and 380 nm (10 nm slit width) every 20 ms and the emission wavelength was monitored at 540 nm (10 nm slit width).

A small fura-2 leak occurred through the cell membranes into the extracellular space. Using  $\text{Mn}^{2+}$  to quench this leak fluorescence, the leak was estimated to be  $0.63 \pm 0.05$  % pr. min ( $n = 3$ ) (for further details see manuscript VII). As most of the experiments showed effects instantaneously greater than 100%, the small leak of fura-2 could not explain the changes in the fluorescent  $\text{Ca}^{2+}_i$ . Furthermore, the extend of fura-2 compartmentalization was estimated by adding 50  $\mu$ M digitonin, which is known to permeabilize the plasma membrane. Subsequently, 1% Triton X-100 was added to permeabilize and release dye from subcellular organelles at the end of an experimental session. The fraction of total intracellular dye compartmentalized was calculated according to Kao (1994) and was  $8.5 \pm 0.6$  % ( $n = 4$ ).

*Data handling:* To calculate the intracellular  $\text{Ca}^{2+}$  concentration, Grynkiewicz' equation was used, with a  $K_d$ -value of 224 nM as reported by Grynkiewicz *et al.* (1985). Routinely, a calibration program was done on the same cell batch as the one used during experiments to determine the limiting values of the ratio  $I_{340}/I_{380}$  when the probe is in the  $\text{Ca}^{2+}$ -saturated form ( $R_{\max}$ ) and in the  $\text{Ca}^{2+}$ -free form ( $R_{\min}$ ) by adding the detergent triton X-100 and excess of EGTA (50 mM) to the cell suspension, respectively. The calcium concentration used to obtain  $R_{\max}$  was 1 mM. During calibration, cells not loaded with fura-2 as well as chemicals used were tested for autofluorescence.

The  $I_{340}/I_{380}$ -ratio was used to calculate the intracellular  $\text{Ca}^{2+}$  concentration,  $[\text{Ca}^{2+}]_i$ , according to Grynkiewicz' equation as indicated below. Results will often be presented as the difference in

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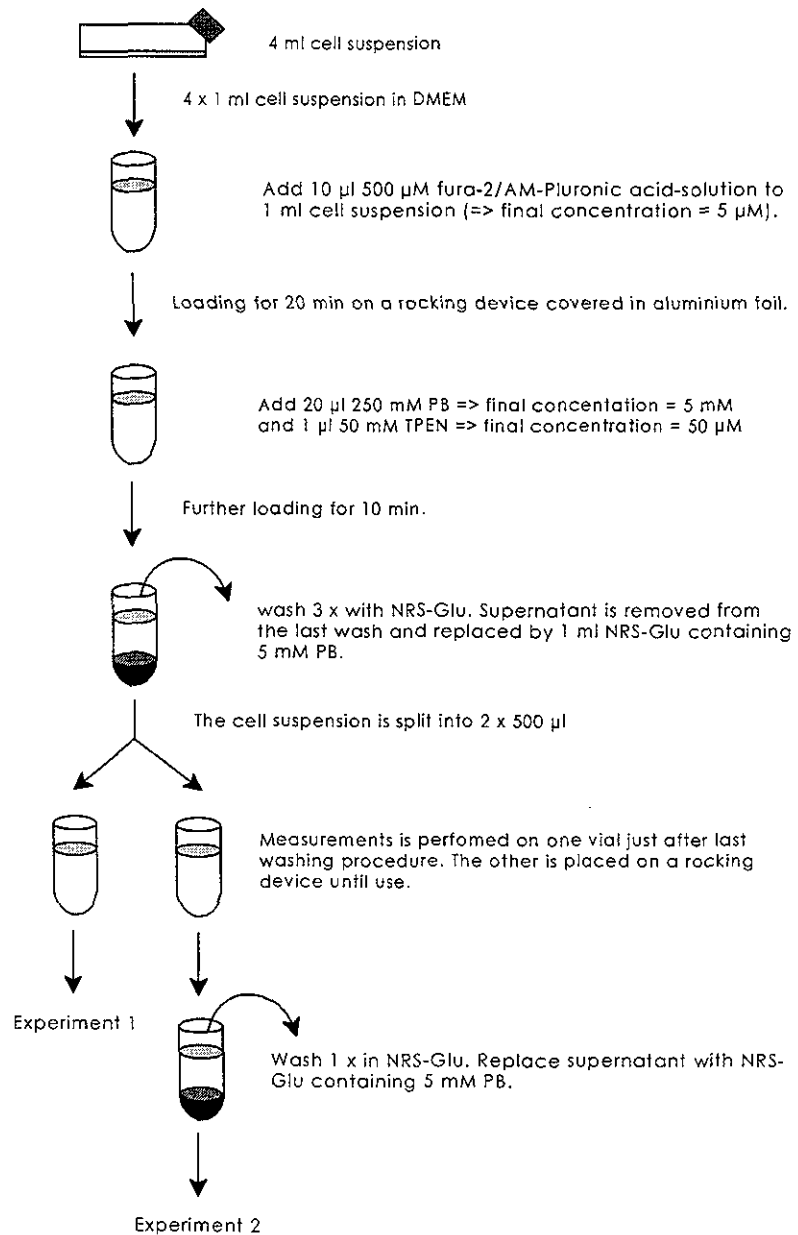
<sup>3</sup>Fura-2 is lipophilic in its AM-form and become hydrophilic when the AM-binding is hydrolysed by intracellular esterases. Fura-2 is a dual-wave indicator that upon binding  $\text{Ca}^{2+}$  exhibits an absorption shift that can be detected by luminescence at excitation wavelengths 340/380 nm and emission wavelength 510 nm.  $K_d$  for  $\text{Ca}^{2+} = 145$  nM at pH 7.0 and 22 °C.

$I_{340}/I_{380}$ -ratio before and after addition of an agent and expressed as relative fluorescence  $\Delta F_{\text{agent}}$ . Calculations of  $[Ca^{2+}]_i$  were performed according to equation 4.2.:

Eq. 4.2.

$$[Ca^{2+}]_i = K_d \cdot \left( \frac{R - R_{\min}}{R_{\max} - R} \right) \cdot \left( \frac{s_{f2}}{s_{b2}} \right)$$

The factor  $s_{f2}/s_{b2}$  represents the ratio of the measured fluorescence intensity when all dye is  $Ca^{2+}$  free and the intensity measured when all the dye is saturated with  $Ca^{2+}$ , both measurements taken at 380 nm.



**Flow diagram 4.3.** Schematic overview showing cell preparation and loading of A6 cells with fura-2/AM for determination of intracellular  $Ca^{2+}$ . PB = probenecid, NRS-Glu = normal Ringer solution containing 5 mM glucose.

#### 4.13. Chemicals & solutions

If the chemicals were dissolved in dimethylsulphoxide (DMSO) or N, N-dimethylformamide (DMF) a final maximum concentration of 1% (v/v) of the solvents were allowed. The effect of the solvents on the  $I_{sc}$ - and fluorescence baseline as well as the autofluorescence was checked before doing experiments.

##### Composition of the used Ringer-solutions:

Normal-Ringer solution (in mM):  $Na^+$ , 115;  $K^+$ , 2.5;  $Cl^-$ , 117;  $Ca^{2+}$ , 1;  $CO_3^{2-}$ , 2.5.

$Ca^{2+}$ -free Ringer (in mM):  $Na^+$ , 115;  $K^+$ , 2.5;  $Cl^-$ , 115;  $CO_3^{2-}$ , 2.5; EGTA, 0.1.

$Cl^-$ -free Ringer (in mM):  $Na^+$ , 110;  $K^+$ , 2;  $Ca^{2+}$ , 1;  $SO_4^{2-}$ , 57; sucrose, 73.

In case of  $Cl^-$ -depletion in electrochemical experiments, only the chamber on the basolateral side was supplemented with  $Cl^-$ -free Ringer. The pH was in all cases 7.4. A final concentration of 5 mM glucose was used during all experiments.

#### 4.14. Statistics

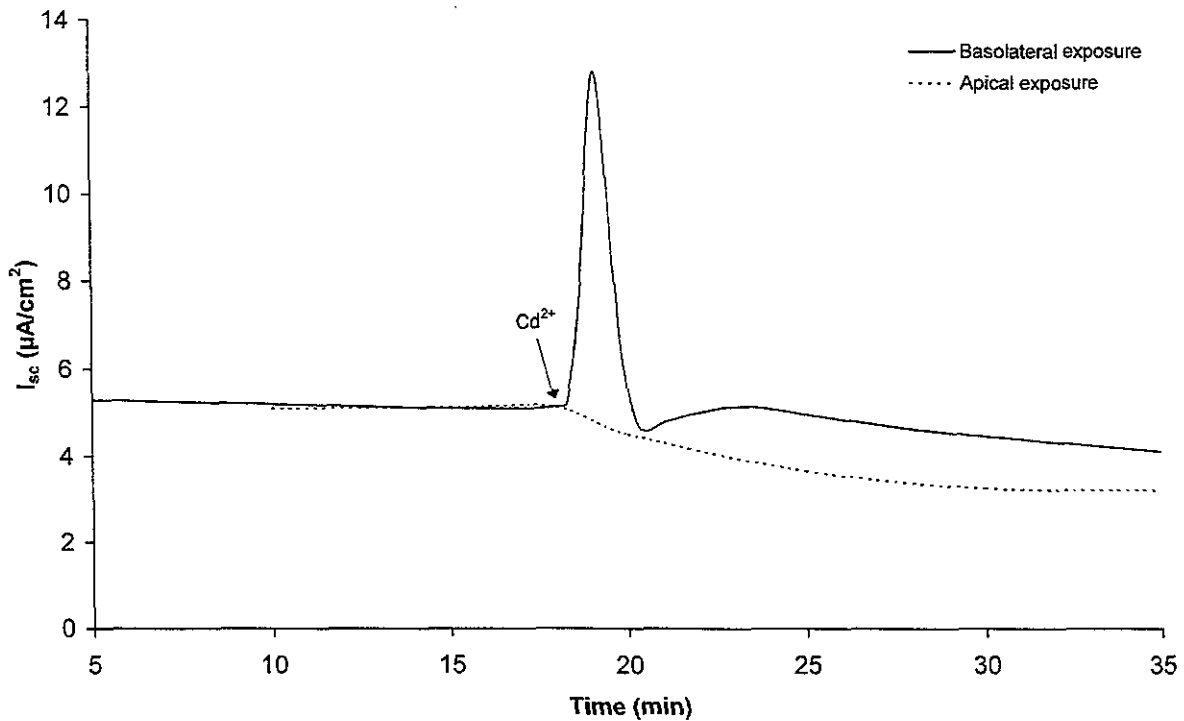
Results are expressed as means  $\pm$  SE, where n indicates the number of independent experiments. Simple two-way comparisons were evaluated by Student's t-test. Comparisons between control and multiple treatment groups were evaluated by one-way ANOVA followed by *post-hoc* analysis of means using the least-significance-difference (LSD) method (Statistica, ver 5.1). Results that had non-parametric distribution were analysed statistically using the non-parametric Kruskal-Wallis ANOVA test and then further tested in groups by Mann-Whitney U test. Statistics of data presented in the form of a percentile score were evaluated on raw data and then expressed as % of control  $\pm$  SE (%). P-values of less than 5% were considered significant.

## 5. MAIN RESULTS

The current section describe  $\text{Cd}^{2+}$ -related effects mainly. Separate subsections briefly summarize cisplatin results (IV) and results not presented in articles or manuscripts. As mentioned in the preface I went to prof. Clauss' laboratory among other things to study noise spectra. Unfortunately, it was not possible to obtain noise-spectra of  $\text{Cd}^{2+}$ -exposed A6 cells why this topic will not be covered in the present thesis.

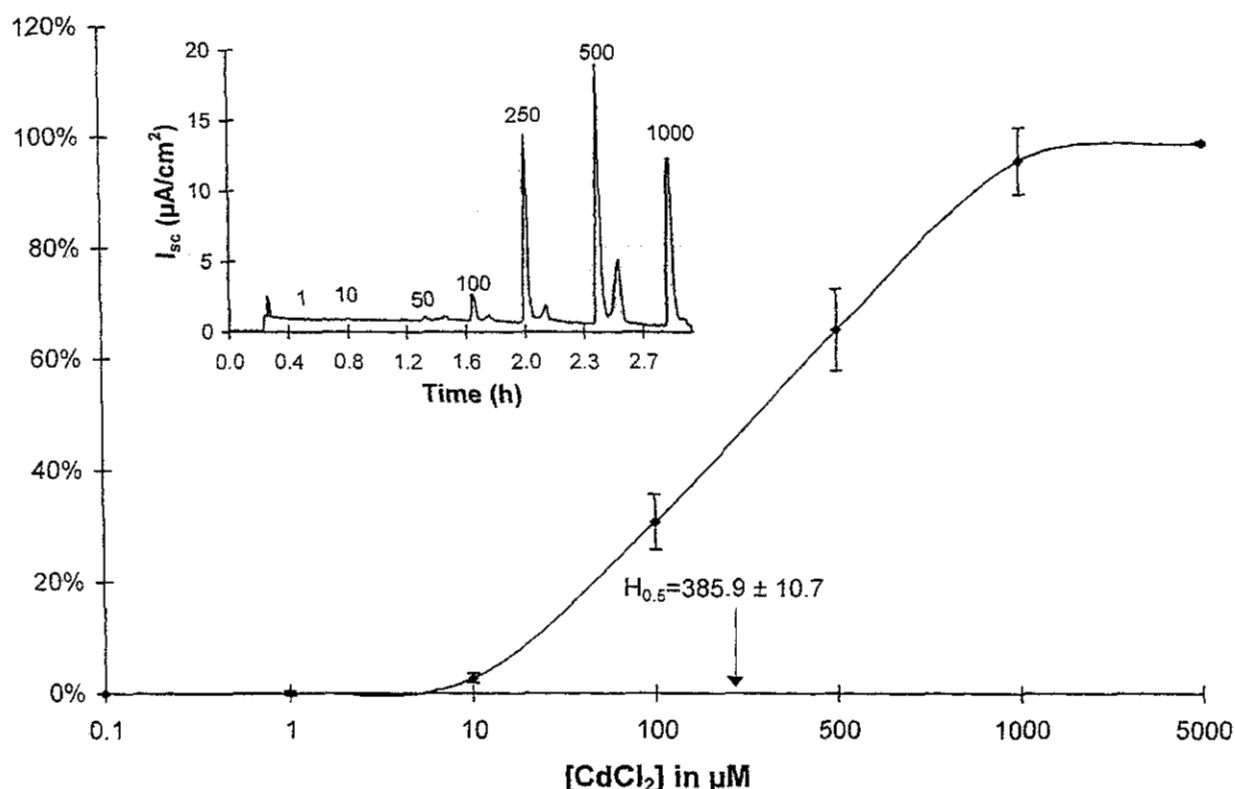
### 5.1. Basal $I_{sc}$ -response and dose-response (II & VII)

Addition of 1 mM  $\text{CdCl}_2$  to the basolateral surface of A6-monolayers induced prompt and transient increases in  $I_{sc}$  ( $\Delta I_{sc(\text{Cd})}$ ) from  $2.3 \pm 0.3$  to  $10.6 \pm 0.8 \mu\text{A}/\text{cm}^2$  ( $n=25$ ,  $p<0.001$ ). The activation sustained for less than five minutes before returning to basal level (figure 5.1). However, when 1 mM  $\text{Cd}^{2+}$  was added to the apical side the response differed completely from that observed when  $\text{Cd}^{2+}$  was applied to the basolateral side as apical  $\text{Cd}^{2+}$  exposure caused a  $\Delta I_{sc(\text{Cd})}$  of  $-1.5 \pm 0.1$  ( $n=3$ ) and basolateral exposure a  $\Delta I_{sc(\text{Cd})}$  of  $8.3 \pm 0.6$  ( $n=25$ ). This suggests that the action of  $\text{Cd}^{2+}$  is highly side-specific, justifying further examination of both apical and basolateral  $\text{Cd}^{2+}$ -exposure. However, because of the prompt and transient nature of  $\Delta I_{sc(\text{Cd})}$  during basolateral treatment and for reasons debated in the Discussion further studies in this thesis focussed on basolateral  $\text{Cd}^{2+}$ -treatment only.



**Figure 5.1.** Time course of short-circuit-current ( $I_{sc}$ ) experiment on confluent A6 cell monolayers. Cadmium exposure of the apical or basolateral side had completely different effects as 1 mM  $\text{Cd}^{2+}$  added to the basolateral side caused  $I_{sc}$  to increase in a prompt and transient manner whereas 1 mM  $\text{Cd}^{2+}$  added to the apical side caused  $I_{sc}$  to drop slowly until a base level was reached (dotted line). Data reproduced from paper VII.

The accumulated dose-response was measured to examine the sensitivity of active ion transport to  $\text{Cd}^{2+}$  by adding increasing concentrations of  $\text{CdCl}_2$  to the basolateral solution and measuring  $\Delta I_{sc}$ . Dose-response relationships were measured in a modified Ussing chamber allowing washing between each addition of  $\text{Cd}^{2+}$ . The results showed that below 100  $\mu\text{M}$   $\text{CdCl}_2$  A6 cells respond marginally, however, response was detectable at 1  $\mu\text{M}$  (figure 5.2). From 100  $\mu\text{M}$  to 1000  $\mu\text{M}$   $\text{CdCl}_2$   $\Delta I_{sc}$  increased from  $2.2 \pm 0.4$  to  $11.4 \pm 1.5 \mu\text{A}/\text{cm}^2$  ( $n = 6$ , figure 5.2, inserted figure). The half maximal stimulation concentration ( $H_{0.5}$ ) determined as mean of six experiments was  $365.3 \pm 19.6 \mu\text{M}$  with a maximal response at 1 mM.



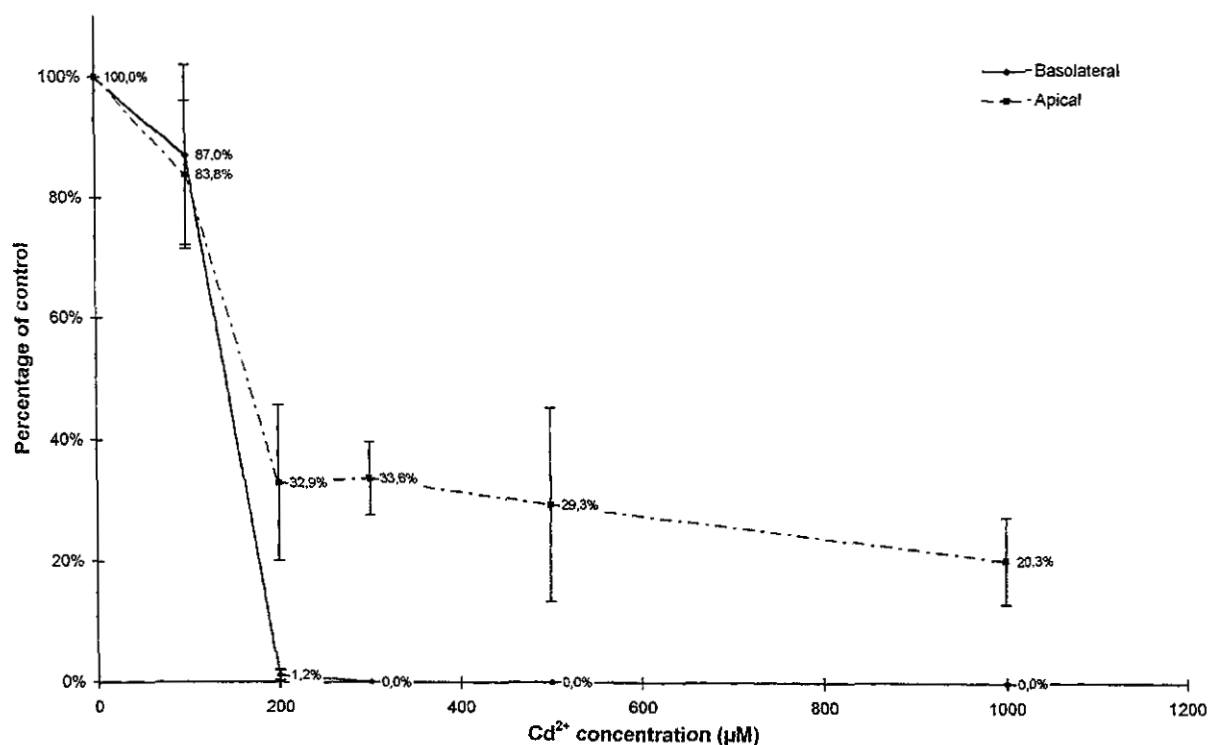
**Figure 5.2.** Dose-response relationship between short-circuit-current ( $I_{sc}$ ), expressed as % of control, and increasing concentrations of cadmium administered to the basolateral surface of A6 cells. The half maximal stimulation concentration ( $H_{0.5}$ ) was calculated as the 50%-level of maximal  $\text{Cd}^{2+}$ -induced stimulation of  $I_{sc}$ . By interpolation  $H_{0.5}$  was estimated to  $365.3 \pm 19.6 \mu\text{M}$  ( $n = 6$ ). The monolayer was washed with normal Ringer solution between each addition of  $\text{Cd}^{2+}$ . Inserted picture; time course of  $I_{sc}$  stimulated by increasing concentrations of  $\text{Cd}^{2+}$  (figures on top of each peak). Data are expressed as mean  $\pm$  SE. Data reproduced from paper VI.

### 5.2. Cytotoxicity (I & II)

The effect of  $\text{Cd}^{2+}$  on cell integrity was determined using two different approaches, namely by successive determinations of  $R_{te}$  and by determination of the  $\text{IC}_{50}$ -value (see Methods for further details). Successive determinations of  $R_{te}$  on A6 cells mounted in modified Ussing chambers indicated that the time from basolateral addition of 1 mM  $\text{CdCl}_2$  to the time when  $R_{te}$  started to decrease markedly was  $39.8 \pm 5.7$  minutes and that  $R_{te}$  reached nearly zero  $\Omega$  in  $109.2 \pm 29.3$  minutes ( $n=5$  in both cases). Consequently, all  $I_{sc}$ -experiments were terminated within 40 minutes



after addition of  $\text{Cd}^{2+}$  to assure that cell integrity was intact. When  $R_{te}$  was used as an endpoint, apical and basolateral additions of  $\text{CdCl}_2$  for 24 hours resulted in  $\text{IC}_{50}$ -values of 173.9 and 147.8  $\mu\text{M}$ , respectively (figure 5.3). Extension of the incubation period for another 24 hours increased the  $\text{IC}_{50}$  value for apical  $\text{CdCl}_2$  addition to 247.0  $\mu\text{M}$ , whereas the  $\text{IC}_{50}$  value for basolateral exposure was unchanged. The monolayer reacted differently depending on which surface was exposed to cadmium. Thus, after 24 hours of exposure with 200  $\mu\text{M}$   $\text{Cd}^{2+}$ ,  $R_{te}$  was 1.2 % and 32.9 % of control values when  $\text{Cd}^{2+}$  was applied to the basolateral and apical side, respectively. The apical/basolateral  $R_{te}$ -values became even more pronounced at concentrations higher than 200  $\mu\text{M}$ . Above 200  $\mu\text{M}$  the basolateral  $R_{te}$  dropped further to 0% and the apical curve levelled off and never decreased below 20.3 % at concentrations as high as 1000  $\mu\text{M}$ . Like in the  $I_{sc}$ -experiments, cell integrity studies also demonstrated side-specific effects, where the cytotoxic action of  $\text{Cd}^{2+}$  was far more pronounced at the basolateral side than at the apical side of A6 monolayers.



**Figure 5.3.** Effect of apical and basolateral  $\text{Cd}^{2+}$  exposure on transepithelial resistance (expressed as % of control values).  $\text{CdCl}_2$  was applied basolaterally (full line) or apically (dotted line). A6 cells were exposed for 24 hours at the concentrations shown in the figure. Values are means  $\pm$  SE of two experiments. Modified and reproduced from article II.

### 5.3. Ionic nature behind $\Delta I_{sc(\text{Cd})}$ (I, II & VI)

To investigate the ionic nature behind the increase in  $\Delta I_{sc(\text{Cd})}$ , inhibitors of  $\text{Na}^+$  and  $\text{Cl}^-$  transport were used. Addition of 100  $\mu\text{M}$  of the sodium channel blocker Amiloride (Garty, 1988) to the apical solution immediately inhibited  $I_{sc}$ . However, the characteristic  $I_{sc}$ -peak evoked by 1 mM  $\text{CdCl}_2$  was still evident and undiminished as  $\Delta I_{sc(\text{Cd})}$  of amiloride pretreated monolayers was  $104.3 \pm 8.5$  % ( $n = 5$ ,  $p = \text{NS}$ ) of control monolayers ( $n$  is raised since the publication of paper II). This

indirectly suggests that  $\text{Na}^+$  is not involved in  $\Delta I_{\text{sc}(\text{Cd})}$ . Since  $\text{Cd}^{2+}$  applied basolaterally increases  $I_{\text{sc}}$  in a  $\text{Na}^+$ -independent way, it is most likely that chloride secretion is involved in the transient nature of  $\Delta I_{\text{sc}(\text{Cd})}$ . As shown in table 5.1 substitution of basolateral chloride by  $\text{SO}_4^{2-}$  for at least 25 minutes reduced  $\Delta I_{\text{sc}(\text{Cd})}$  to  $11.5 \pm 3.5 \%$  ( $n = 4$ ,  $p < 0.001$ ) compared with control monolayers showing that  $\text{Cl}^-$  transport plays a crucial role in  $\text{Cd}^{2+}$ -activated  $I_{\text{sc}}$ . Various  $\text{Cl}^-$ -transport blockers were employed to further characterize the possible  $\text{Cl}^-$  current induced by  $\text{Cd}^{2+}$ . The blockers were applied to the apical solution with exception of furosemide, which was applied to the basolateral solution. Table 5.1 shows that both non-selective anion blockers DPC (Di Stefano, *et al.*, 1985) and NPPB (Wangemann *et al.*, 1986) reduced  $\Delta I_{\text{sc}(\text{Cd})}$  significantly to  $64.4 \pm 14.0 \%$  ( $p < 0.05$ ) and  $37.8 \pm 3.5 \%$  ( $p < 0.01$ ) of control level, respectively. Among the two  $\text{Cl}^-$ -exchange blockers, furosemide and DIDS (Cabantchik & Greger, 1992), only furosemide reduced  $\Delta I_{\text{sc}(\text{Cd})}$  significantly to  $56.5 \pm 20.8 \%$  of control level ( $p < 0.05$ ). The fenemates, niflumic acid (NFA) and flufenamic acid (FFA), both blockers of  $\text{Ca}^{2+}$ -activated  $\text{Cl}^-$  currents ( $I_{\text{Cl}(\text{Ca})}$ ) (White, 1990) had significant blocking effects with FFA being most potent. Accordingly, NFA reduced  $\Delta I_{\text{sc}(\text{Cd})}$  to  $46.6 \pm 15.8 \%$  ( $p < 0.01$ ) and FFA to  $5.0 \pm 0.6 \%$  ( $p < 0.001$ ) of control levels, which for FFA corresponds to  $0.6 \pm 0.1 \mu\text{A}/\text{cm}^2$  ( $n = 5$ ) compared with the control of  $8.8 \pm 0.8 \mu\text{A}/\text{cm}^2$  ( $n = 24$ ). Overall, the cotransporter-inhibitors had only marginal effects on  $\Delta I_{\text{sc}(\text{Cd})}$ , the fenemates having the greatest effect on  $\Delta I_{\text{sc}(\text{Cd})}$ . This suggests that the observed  $\text{Cd}^{2+}$ -activated  $I_{\text{sc}}$  involves  $\text{Cl}^-$ -secretion that possibly depends on calcium mobilization, likely through activation of  $I_{\text{Cl}(\text{Ca})}$ .

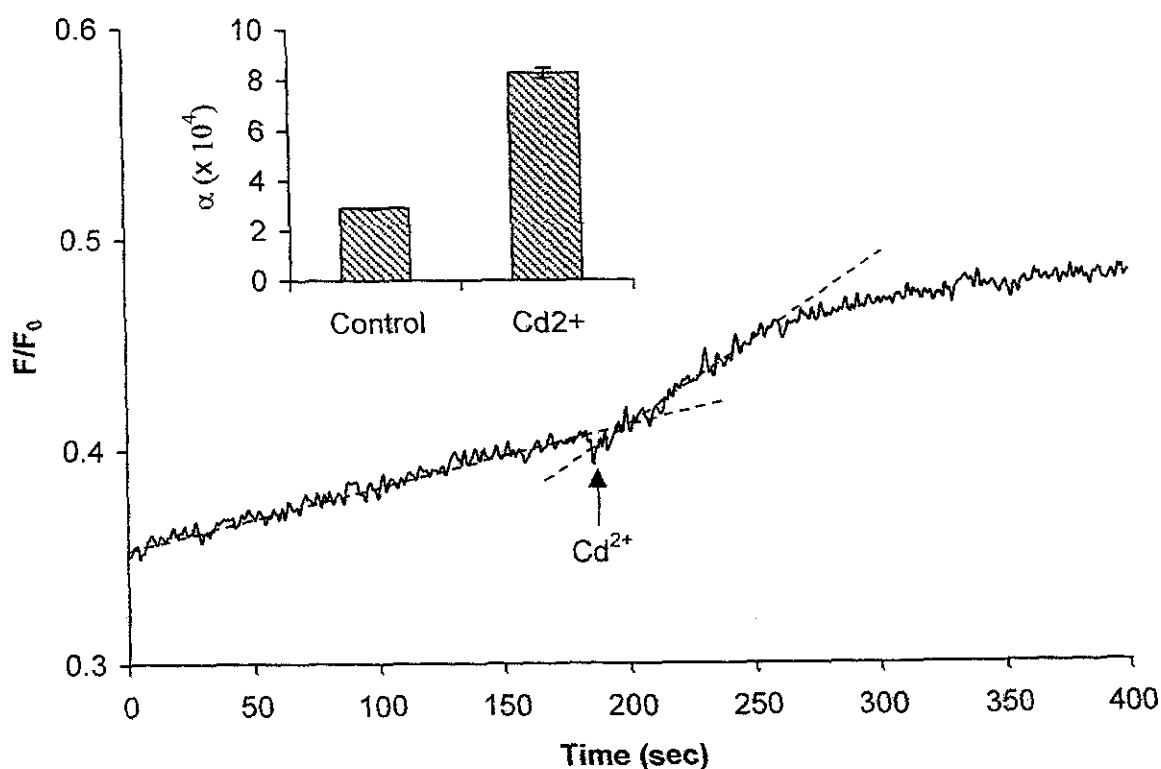
**Table 5.1.** The effect of various chloride channel inhibitors on  $\text{Cd}^{2+}$ -activated short-circuit-current (1 mM  $\text{CdCl}_2$ , basolaterally). The results are expressed as absolute values and as percent of control levels. Data are given as means  $\pm$  SE in %; p, significance level by comparison with control; n, number of experiments. All blockers with exception of furosemide (500  $\mu\text{M}$ ) were added to the apical side in concentrations as follows (in  $\mu\text{M}$ ): 100: DIDS, FFA, NFA, NPPB; 350: DPC. Reproduced from manuscript VI.

Treatment	$\Delta I_{\text{sc}(\text{Cd})}$ ( $\mu\text{A}/\text{cm}^2$ )	% of control	p	n
Control	$8.8 \pm 0.8$	100		25
Chloride depletion	$1.0 \pm 0.3$	$11.5 \pm 3.5$	$<0.001$	4
DPC	$5.7 \pm 1.2$	$64.4 \pm 14.0$	$<0.05$	7
NPPB	$3.3 \pm 0.3$	$37.8 \pm 3.5$	$<0.01$	4
FFA	$0.6 \pm 0.1$	$5.0 \pm 0.6$	$<0.001$	5
NFA	$3.8 \pm 1.4$	$46.6 \pm 15.8$	$<0.01$	6
DIDS	$9.5 \pm 2.5$	$107.7 \pm 28.8$	NS	4
Furosemide	$5.0 \pm 1.8$	$56.5 \pm 20.8$	$<0.05$	6

#### 5.4. Direct measurements of $\text{Cd}^{2+}$ -mediated $\text{Cl}^-$ transport using SPQ-fluorescence (VI)

Results from  $I_{\text{sc}}$ -experiments showed that  $\text{Cd}^{2+}$  transiently activates the transepithelial ion transport in A6 monolayers, apparently including  $\text{Cl}^-$ -secretion only. To address this topic further the  $\text{Cd}^{2+}$ -activated ion-transport was measured directly using the  $\text{Cl}^-$ -specific probe, SPQ (Verkman, 1990). The cells were loaded with SPQ as this is the most appropriate methods for detecting small changes in chloride transport (Biwersi, *et al.*, 1994). The optimal way to detect chloride transport is to have chloride concentrations that resemble the physiological conditions, i.e. high  $[\text{Cl}^-]$  outside the cells. However, to increase the driving force for  $\text{Cl}^-$  the SPQ-loaded

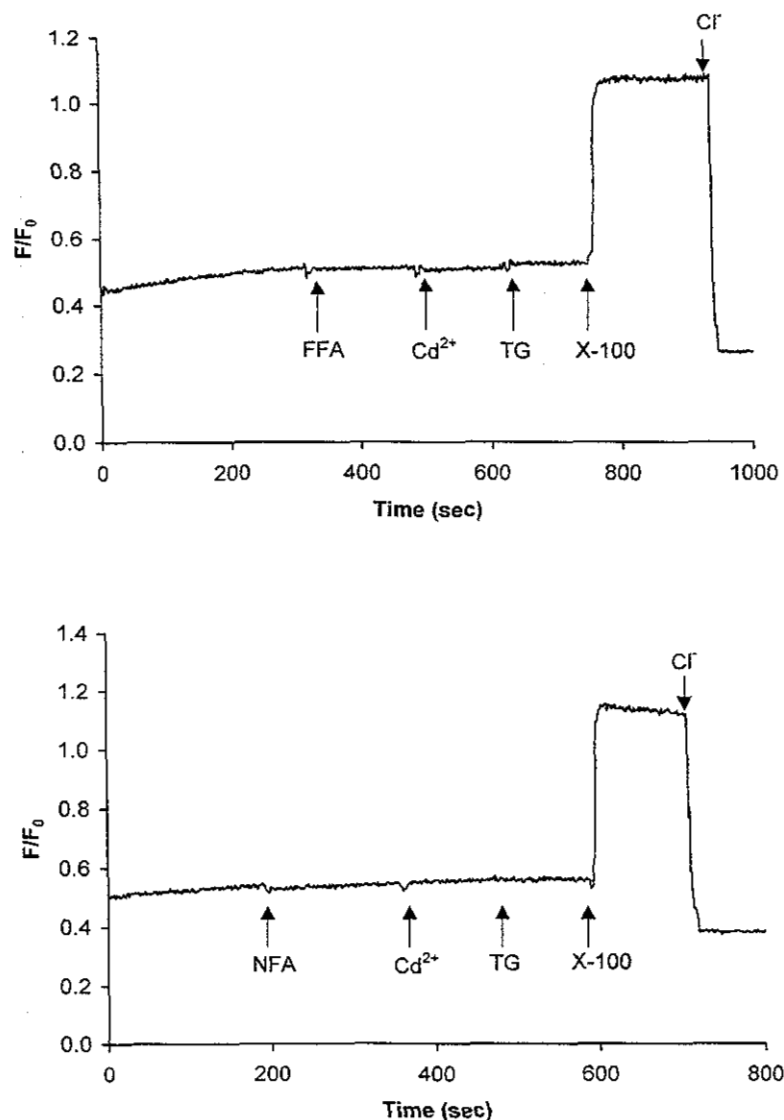
cells were bathed in Cl<sup>-</sup>-free Ringer (for further discussion please refer to manuscript VI). Because of the driving force Cl<sup>-</sup> started to efflux from the cells immediately after replacement of Cl<sup>-</sup>-containing Ringer with Cl<sup>-</sup>-free Ringer. To minimize the influence of Cl<sup>-</sup>-free conditions on the calculation of intracellular Cl<sup>-</sup> content, the mean chloride content was calculated from data obtained just after the start of experiment and was  $14.1 \pm 0.6$  mM ( $n = 30$ ). The average basal Cl<sup>-</sup>-secretion, expressed as the change in Cl<sup>-</sup>-concentration per min and abbreviated as  $[\Delta\text{Cl}^-]$ , during Cl<sup>-</sup>-free condition, was  $-523.3 \pm 42.7$   $\mu\text{M} \cdot \text{min}^{-1}$  ( $n = 32$ ). The value is negative due to the loss of Cl<sup>-</sup> in the SPQ-loaded intracellular environment. As shown in figure 5.4, a cell suspension exposed to 1 mM CdSO<sub>4</sub> increased the arbitrary slope, expressed as  $\Delta F/F_0 \cdot \text{min}^{-1} (\times 10^3)$ , from the basal level of  $9.67 \pm 1.67$  to  $24.48 \pm 3.97$  ( $p < 0.001$ ,  $n = 10$ ). Accordingly,  $[\Delta\text{Cl}^-]$  increased from  $-566.9 \pm 115.0$  to  $-1050.0 \pm 154.5$   $\mu\text{M} \cdot \text{min}^{-1}$  ( $p < 0.001$ ,  $n = 10$ ) in Cd<sup>2+</sup>-exposed cells compared with control cells. This occurred within  $122.4 \pm 14.9$  seconds before returning to the basal slope value (plateau level).



**Figure 5.4.** Typical recording showing changes in intracellular Cl<sup>-</sup> concentration (expressed as  $F/F_0$ -ratio) following exposure to 1 mM CdSO<sub>4</sub>. Please note that increased fluorescence means lower intracellular Cl<sup>-</sup> concentration. The average slope of fluorescence before and after addition of cadmium is indicated by the dotted lines. The fluorescence at time zero represents the basal chloride content. The inserted figure shows the mean value  $\pm$  SE of the slopes,  $\alpha$ , ( $\times 10^4 \text{ s}^{-1}$ ) before and after Cd<sup>2+</sup> exposure. Cells were loaded with 5 mM SPQ according to the descriptions in Methods. Reproduced from article VI.

The fenemates, NFA and FFA, were the most effective inhibitors of  $\Delta I_{\text{sc(Cd)}}$  as indicated in table 5.1. The two fenemates were therefore applied to the SPQ-loaded cell suspension at final concentrations of 100  $\mu\text{M}$ . As demonstrated in figure 5.5 both agents almost completely abolished

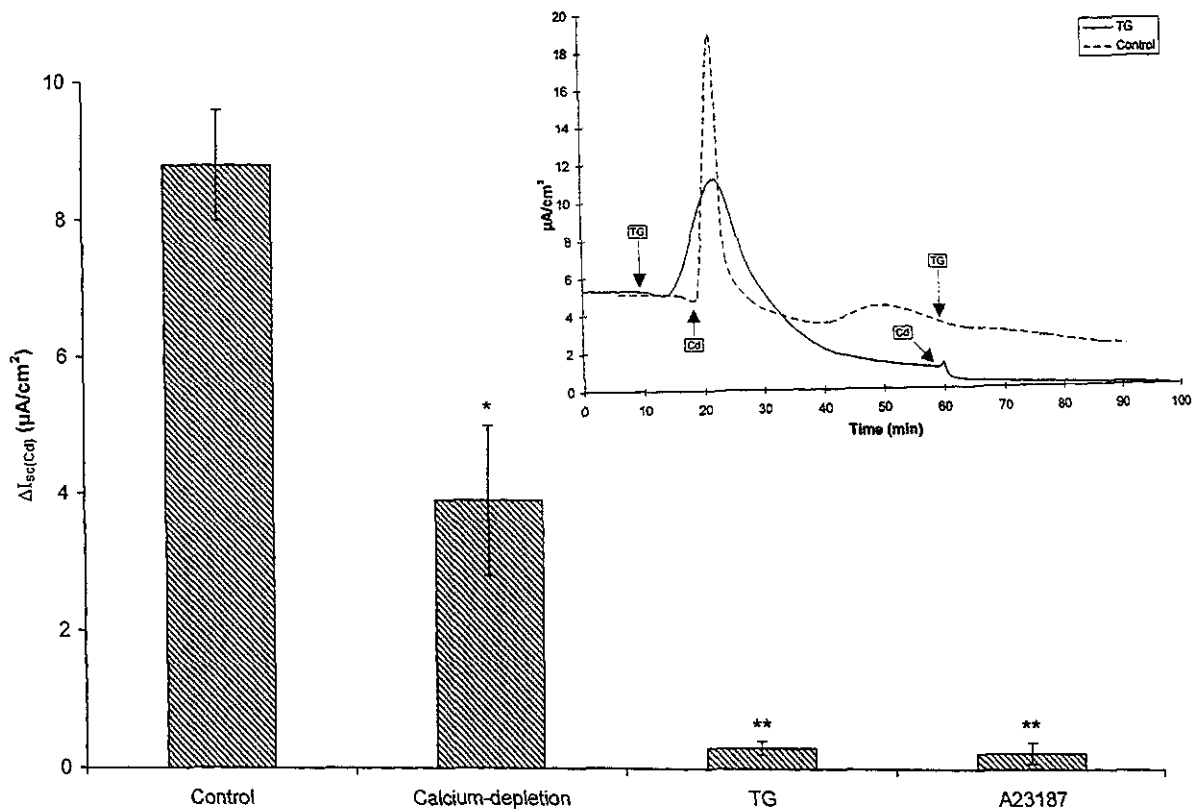
the  $\text{Cd}^{2+}$ -activated  $\text{Cl}^-$ -secretion. Thus,  $\Delta F_{\text{Cd}}/F_0 \cdot \text{min}^{-1} (\times 10^3)$  went from  $24.48 \pm 3.97$  ( $n = 10$ ) in control cells to  $4.29 \pm 1.35$  ( $p < 0.001$ ,  $n = 5$ ) and to  $3.15 \pm 0.58$  ( $p < 0.001$ ,  $n = 3$ ) in FFA and NFA-treated cells, respectively. Not only did the fenemates lower the  $\text{Cd}^{2+}$ -activated secretion ( $[\Delta \text{Cl}^-]_{\text{Cd}}$ ) compared with control conditions, but secretion was also lower than the basal secretion of  $-523.3 \pm 42.7 \mu\text{M} \cdot \text{min}^{-1}$ . Hence,  $[\Delta \text{Cl}^-]_{\text{Cd}}$  was significantly lowered in the presence of FFA and NFA to  $-185.7 \pm 55.9 \mu\text{M} \cdot \text{min}^{-1}$  ( $p < 0.01$ ) and  $-102.9 \pm 19.6 \mu\text{M} \cdot \text{min}^{-1}$  ( $p < 0.05$ ), respectively compared with control conditions. As illustrated in figure 5.5, the use of the detergent, Triton X-100 caused the fluorescence to increase promptly, which could be reversed by adding excess  $\text{Cl}^-$  to the cell suspension (see figure legend for details).



**Figure 5.5.** Typical time courses showing the effects of chloride channel blockers on  $\text{Cd}^{2+}$ -stimulated  $\text{Cl}^-$ -secretion measured as  $F/F_0$ . Both FFA (top figure) and NFA (bottom figure) completely abolished  $\text{Cd}^{2+}$ -stimulated fluorescence. Thapsigargin (TG)-mediated release of intracellular  $\text{Ca}^{2+}$  had no effect on fluorescence in cells preexposed to  $\text{Cd}^{2+}$  and  $\text{Cl}^-$ -channel blockers. Addition of the detergent, Triton X-100 (1 % v/v) caused the fluorescence to increase promptly. This proves that  $\text{Cl}^-$  is driven out of the cells towards the  $\text{Cl}^-$ -free medium causing less quenching of SPQ. Excess addition of  $\text{Cl}^-$  rapidly quenches SPQ to levels lower than basal. Concentrations used: FFA and NFA; 100  $\mu\text{M}$ ;  $\text{Cd}^{2+}$ , 1 mM; TG, 0.8  $\mu\text{M}$ ;  $\text{Cl}^-$ , 100 mM.

### 5.5. Calcium involvement in $\text{Cd}^{2+}$ -mediated $\text{Cl}^-$ secretion (I, II, VI & VII)

The fast kinetics of  $\Delta I_{\text{sc}(\text{Cd})}$  and the fact that particularly the fenemates, known to block  $\text{Ca}^{2+}$ -dependent chloride channels, displayed the most prominent inhibitory effects on  $\Delta I_{\text{sc}(\text{Cd})}$  and SPQ-sensitive  $\text{Cl}^-$ -secretion give strong evidence of the involvement of  $\text{Ca}^{2+}$ . Therefore, to study this further some preliminary experiments were performed with TG, a well-characterized blocker known to inhibit the  $\text{Ca}^{2+}$ -ATPase in endoplasmic reticulum (Thastrup, 1989). Consequently, depletion of  $\text{Ca}^{2+}$  revealed that  $\Delta I_{\text{sc}(\text{Cd})}$  decreased significantly from control conditions of  $8.8 \pm 0.8 \mu\text{A}/\text{cm}^2$  ( $n=24$ ) to  $3.9 \pm 1.1$  ( $n=3$ ,  $p<0.05$ ) (figure 5.6). Preexposure with TG and A23187 both known to provoke a massive increase in intracellular  $\text{Ca}^{2+}$ , the latter by acting as a  $\text{Ca}^{2+}$ -ionophore (Reed & Lardy, 1972), almost removed  $\Delta I_{\text{sc}(\text{Cd})}$ , as  $\Delta I_{\text{sc}(\text{Cd})}$  decreased to  $0.3 \pm 0.1 \mu\text{A}/\text{cm}^2$  ( $n=4$ ,  $p<0.001$ ) and to  $0.2 \pm 0.1 \mu\text{A}/\text{cm}^2$  ( $n=3$ ,  $p<0.001$ ), respectively. Furthermore,  $\text{Cd}^{2+}$  and TG could neutralize each other since neither  $\text{Cd}^{2+}$  nor TG could stimulate the  $I_{\text{sc}}$  further when preexposed to the counterpart (figure 5.6, inserted). Similar responses were obtained in SPQ-loaded cells as TG and  $\text{Cd}^{2+}$  also could neutralise the response of the counterpart (please refer to manuscript VI). Overall, the results suggest that  $\text{Ca}^{2+}$  may play an important role in  $\text{Cd}^{2+}$ -mediated  $\text{Cl}^-$  secretion as indicated both in  $I_{\text{sc}}$  and SPQ-experiments.

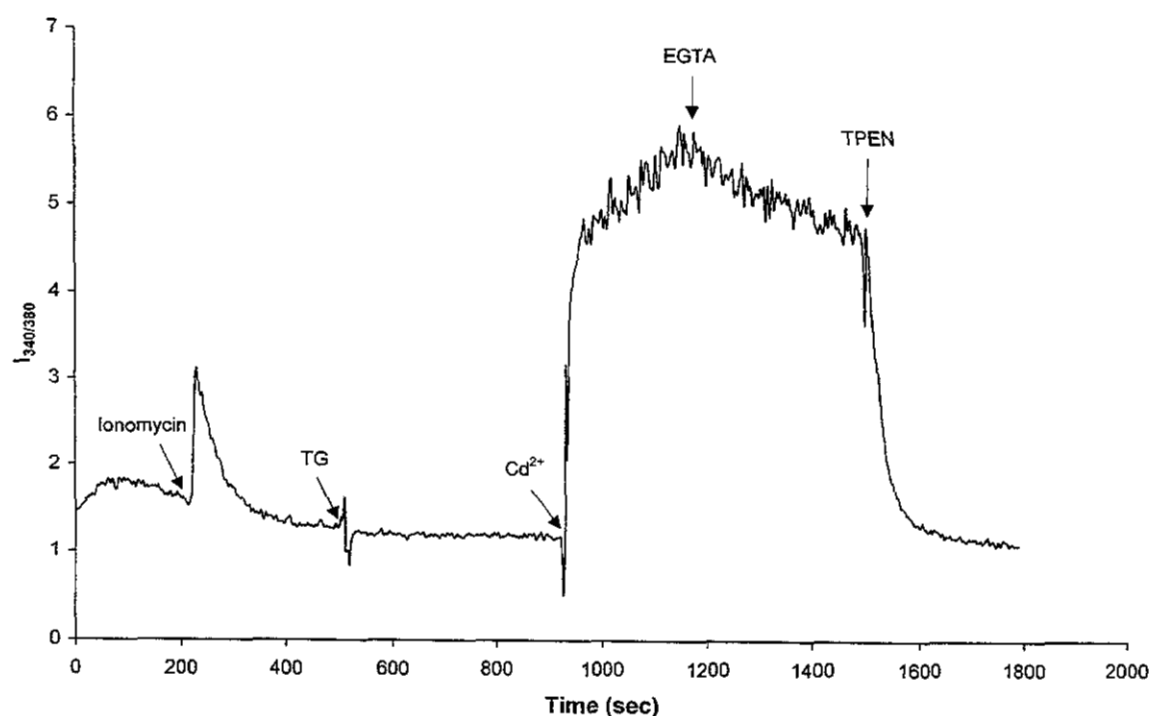


**Figure 5.6.** Effect of calcium-depletion, TG and A23187 on  $\text{Cd}^{2+}$  (1 mM)-stimulated short-circuit-current ( $\Delta I_{\text{sc}(\text{Cd})}$ ). TG (0.4  $\mu\text{M}$ ) and A23187 (4  $\mu\text{M}$ ), both known to cause massive increases in intracellular  $\text{Ca}^{2+}$ , almost completely cancelled  $\Delta I_{\text{sc}(\text{Cd})}$ . Inserted: time course showing the effect of TG and  $\text{Cd}^{2+}$  on  $\Delta I_{\text{sc}(\text{Cd})}$ . TG and A23187 were added to the basolateral side of monolayers. \*  $p < 0.05$  and \*\*  $p < 0.01$  compared with control. Modified and reproduced from article II & manuscript VI.

### 5.6. Direct measurement of intracellular $\text{Ca}^{2+}$ using fura-2 (VII)

Indirect evidence suggests that  $\text{Ca}^{2+}$ -mobilization is involved in  $\Delta I_{\text{sc(Cd)}}$  why direct measurements of intracellular  $\text{Ca}^{2+}$  were needed. The well-characterized  $\text{Ca}^{2+}$ -probe, fura-2, was used to further characterize  $\text{Cd}^{2+}$ -mediated intracellular events.

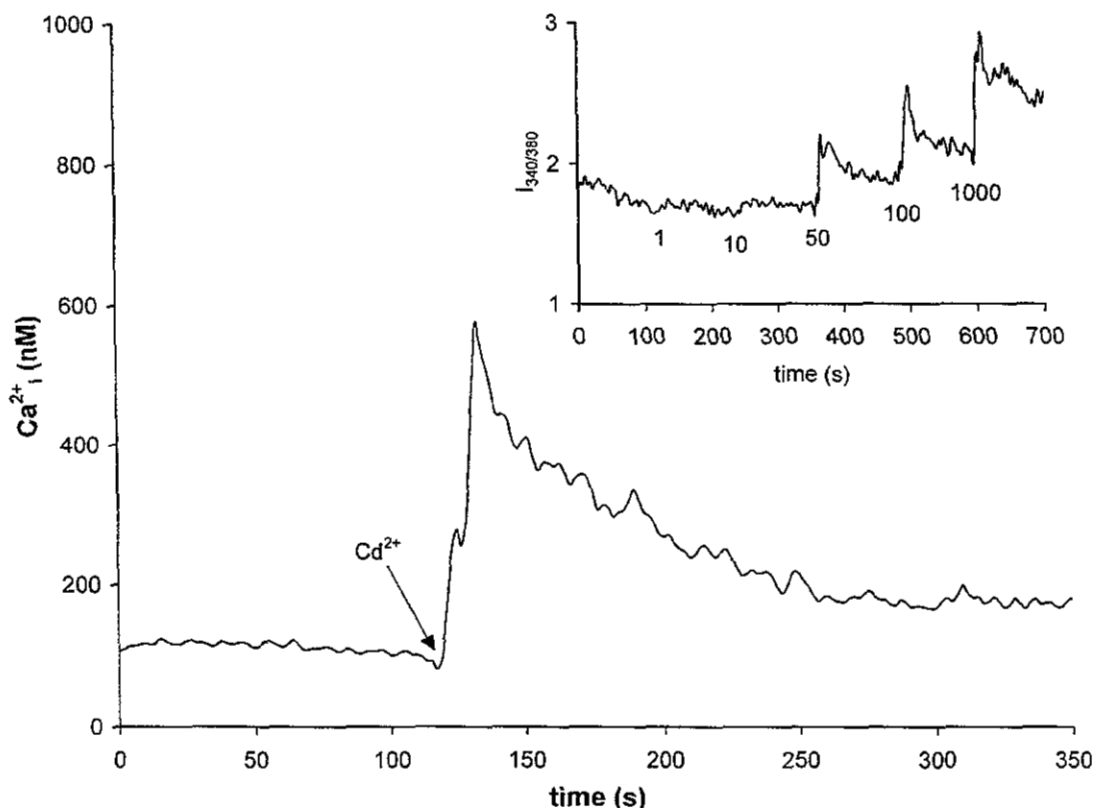
Studies of the effects of  $\text{Cd}^{2+}$  on intracellular  $\text{Ca}^{2+}$  homeostasis using fura-2 is hampered by the fact that divalent metal ions like  $\text{Cd}^{2+}$  also binds to the probe and cause fluorescence often more intense than that of the fura-2- $\text{Ca}^{2+}$  complex. However, this depends on the fact that  $\text{Cd}^{2+}$  enters the cells in its free form. As described in Methods the cells were incubated with TPEN, before carrying out the experiments to prevent interactions with  $\text{Ca}^{2+}$ -fura-complex. TPEN chelates heavy metals and not  $\text{Ca}^{2+}$  allowing minimum disturbance of the fluorescence signal achieved from the  $\text{Ca}^{2+}$ -dye-complex (Hinkle, 1992; Snitsarev *et al.*, 1996). Therefore, the contribution from  $\text{Cd}^{2+}$ -fura-complex can be ignored if TPEN behaves as expected. In a pilot study, the cell membrane of A6 cells was permeabilized with 10  $\mu\text{M}$  of the calcium ionophore ionomycin to permit  $\text{Cd}^{2+}$  entry to the cells and then chelated with TPEN (figure 5.7). Addition of 50  $\mu\text{M}$  TPEN completely cancelled the increase in fluorescence evoked by 400  $\mu\text{M}$   $\text{Cd}^{2+}$ . Furthermore, addition of 5 mM EGTA did not affect the fluorescence supporting that fura-2 was only located intracellularly. Again, please refer to the discussion of manuscript VII regarding the comprehensive discussion of  $\text{Cd}^{2+}$  interactions with the fura-2 probe.



**Figure 5.7.** Cells were permeabilized by 10  $\mu\text{M}$  Ionomycin and depleted for intracellular  $\text{Ca}^{2+}$  using 800  $\mu\text{M}$  TG. Subsequently, the permeable membrane allowed  $\text{Cd}^{2+}$  (400  $\mu\text{M}$ ) to enter the intracellular environment resulting in a prompt increase in fluorescence expressed as  $I_{340}/I_{380}$ , which was unaffected by 5 mM EGTA, but could be reversed by 50  $\mu\text{M}$  TPEN.

The test concentration of  $\text{Cd}^{2+}$  was set at  $H_{0.5}$ -level, i.e. 400  $\mu\text{M}$  in the subsequent experiments. The basal concentration of  $[\text{Ca}^{2+}]_i$  of isolated, fura-2-loaded A6 cells were  $111 \pm 7$  nM determined in 73 experiments.  $[\text{Ca}^{2+}]_i$  rose steeply to peak-values of  $579 \pm 61$  nM ( $n = 23$ ) within  $15 \pm 1$

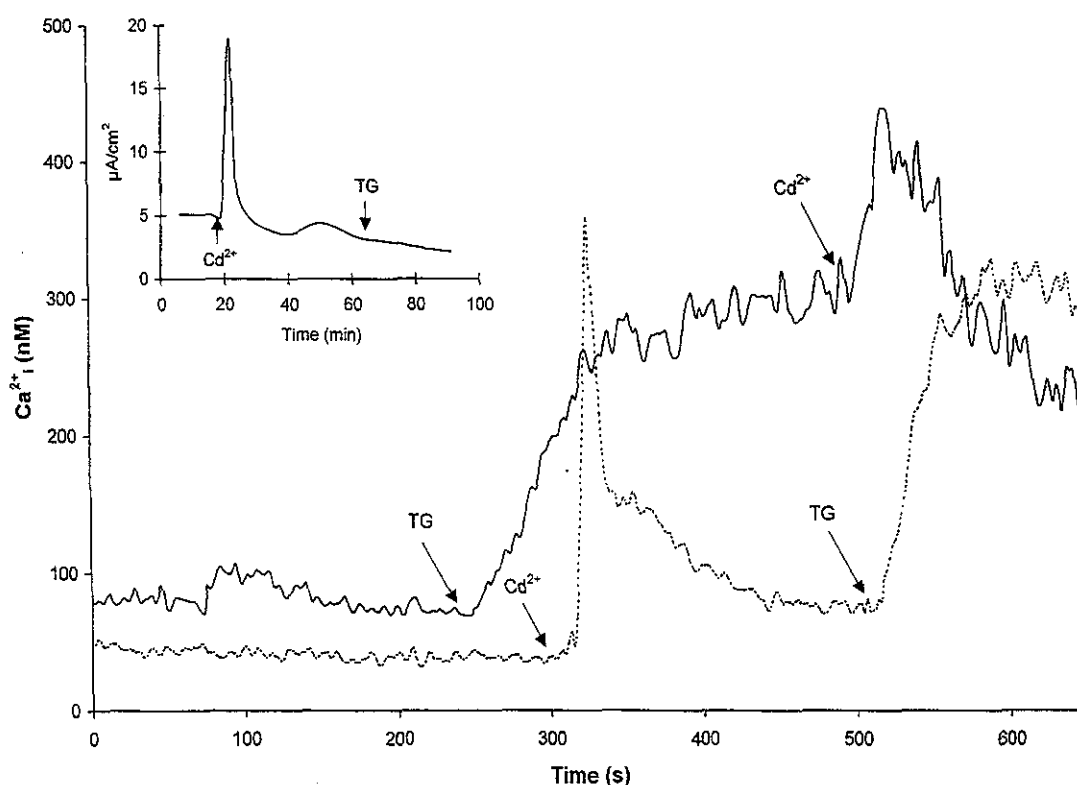
seconds when stimulated with 400  $\mu\text{M}$   $\text{Cd}^{2+}$  ( $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$ ), and declined afterwards to control level or slightly above control level within 3 minutes (figure 5.8). When the fluorescence intensity at peak height was compared with the basal level,  $\text{Cd}^{2+}$  displayed a peak/basal-ratio of  $6.1 \pm 0.6$  ( $n = 23$ ) consistently with the previously obtained  $I_{\text{sc}}$ -results. Dose-response studies showed that below 10  $\mu\text{M}$   $\text{Cd}^{2+}$  fura-2 loaded A6-cells responded marginally whereas above this threshold the response was dose-dependent (figure 5.8, inserted).



**Figure 5.8.**  $[\text{Ca}^{2+}]_{\text{i}}$  measurements in suspensions of fura-2 loaded A6 cells at rest and after application of 400  $\mu\text{M}$   $\text{Cd}^{2+}$ .  $\text{Cd}^{2+}$  evokes a fast and transient increase in  $[\text{Ca}^{2+}]_{\text{i}}$ , which within 3 minutes declines to or slightly above basal level. Furthermore, the transient increase is dose dependent as showed in the inserted figure and responds at concentrations of  $\text{Cd}^{2+}$  above 10  $\mu\text{M}$  which is consistent with the  $I_{\text{sc}}$ -results. Reproduced from manuscript VII.

### 5.7. Origin of $\text{Cd}^{2+}$ -induced $\text{Ca}^{2+}$ increase (II & VII)

To investigate the origin of the  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$ , TG and TMB-8, a benzoic acid derivative reported to abolish the  $\text{Ca}^{2+}$ -mobilization from  $\text{IP}_3$ -sensitive stores in rat kidney (Salomonsson & Arendshorst, 1999), were used. However, only results from TG-experiments are showed here. As for TMB-8 results and discussion see manuscript VII. 0.8  $\mu\text{M}$  TG induced, as expected, an increase in  $\text{Ca}^{2+}_{\text{i}}$  which remained at a plateau level of  $337 \pm 59$  nM ( $n = 8$ ) (figure 5.9). Interestingly, TG (and TMB-8) abolished  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  as the peak/basal-ratio was  $0.4 \pm 0.1$  ( $n = 4$ ) compared with a control level of  $6.1 \pm 0.6$  ( $n = 23$ ). Preexposure with  $\text{Cd}^{2+}$  and subsequent addition of TG increased  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  to  $383 \pm 67$  nM ( $n = 7$ ), which was insignificantly different from the control levels mentioned above (figure 5.9). This proves that the intracellular pools are the main source of  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$ , and that they are not emptied by  $\text{Cd}^{2+}$ .



**Figure 5.9.** Time course showing  $[Ca^{2+}]_i$ , when cells are exposed to  $Cd^{2+}$  ( $400 \mu M$ ) and subsequently to TG ( $0.8 \mu M$ , dotted line) or conversely (full line). See legend belonging to figure 5.6 for additional information. Inserted figure shows a typical time course of an  $I_{sc}$ -experiment when TG is added to  $Cd^{2+}$ -preexposed A6 cells (data obtained from article II). Note that TG is able to increase  $Ca^{2+}$  further following  $Cd^{2+}$  treatment (dotted line). Reproduced from article II & manuscript VII.

### 5.8. Interaction studies

In a pilot study it was found that in cells preexposed to  $Cd^{2+}$ -related metal  $Zn^{2+}$ ,  $\Delta I_{sc(Cd)}$  was completely abolished (figure 5.10). Therefore, interaction studies between  $Cd^{2+}$  and  $Ni^{2+}$  and  $Zn^{2+}$  were performed in SPQ and fura-2 experiments to explore if the effects of these three metals are by similar mechanisms. In fact,  $Zn^{2+}$  and  $Ni^{2+}$ , could also activate the SPQ-sensitive  $Cl^-$ -transport in a  $Cd^{2+}$ -like manner and  $Zn^{2+}$  was an even more potent activator than  $Cd^{2+}$  (table 5.2). Regarding the  $Cd^{2+}$ -metal interactions, preexposure with  $Zn^{2+}$  and  $Ni^{2+}$  significantly inhibited the  $Cd^{2+}$ -stimulated ratio  $\Delta F_{Cd}/F_0 \cdot \min^{-1} (\times 10^3)$  from  $24.48 \pm 3.97$  to  $3.28 \pm 1.22$  ( $p < 0.001$ ) and to  $6.54 \pm 0.96$  ( $p < 0.01$ ), respectively (table 5.3). Accordingly, preexposure with  $Zn^{2+}$  and  $Ni^{2+}$  (and TG) all inhibited the  $Cd^{2+}$ -activated  $Cl^-$ -secretion comparable to the results obtained with the fenemate-blockers (table 5.3). Overall, the ratio between stimulator and basal fluorescence ( $\Delta F_{stimulator}/\Delta F_{basal}$ ) was calculated as  $2.9 \pm 0.5$ ,  $3.8 \pm 0.5$ ,  $2.6 \pm 0.3$  and  $1.7 \pm 0.2$  for  $Cd^{2+}$ ,  $Zn^{2+}$ ,  $Ni^{2+}$  and TG, respectively. ANOVA did not reveal any statistical differences between the stimulators.



**Table 5.2.** Effects of  $\text{Cd}^{2+}$ ,  $\text{Zn}^{2+}$ ,  $\text{Ni}^{2+}$  and TG on chloride transport in SPQ-loaded A6-cells. The concentrations used were 1 mM for the metals and 0.8  $\mu\text{M}$  for thapsigargin added to a chloride free extracellular solution. The results are expressed either as relative fluorescence variation,  $\Delta F/F_0$  where  $\Delta F$  represents the change in intensity upon addition of an agent and  $F_0$  the maximal intensity, or as  $\mu\text{M}/\text{min}$  calculated from the linear plot given in figure 4.4. Results are expressed as mean  $\pm$  SE. ANOVA did not bring out any differences between the stimulators. In general, the potency of stimulators was in decreasing order;  $\text{Zn}^{2+} > \text{Cd}^{2+} > \text{Ni}^{2+} > \text{TG}$ . Reproduced from manuscript VI.

	Effects of stimulators on $\text{Cl}^-$ secretion			
	$\Delta F/F_0 \cdot \text{min}^{-1} (\times 10^3)$		$\mu\text{M} \cdot \text{min}^{-1}$	
	Control	Stimulator	Control	Stimulator
$\text{Cd}^{2+}$ (n = 10)	$9.67 \pm 1.67$	$24.48 \pm 3.97^{***}$	$-583.1 \pm 114.2$	$-1050.0 \pm 154.5^{***}$
$\text{Zn}^{2+}$ (n = 5)	$7.09 \pm 1.32$	$31.94 \pm 4.50^{***}$	$-512.0 \pm 114.7$	$-1234.2 \pm 80.3^{***}$
$\text{Ni}^{2+}$ (n = 3)	$7.26 \pm 1.14$	$18.07 \pm 0.76^*$	$-371.8 \pm 47.7$	$-774.1 \pm 104.4$
TG (n = 5)	$10.00 \pm 1.27$	$16.30 \pm 2.62$	$-617.2 \pm 64.1$	$-729.2 \pm 150.3$

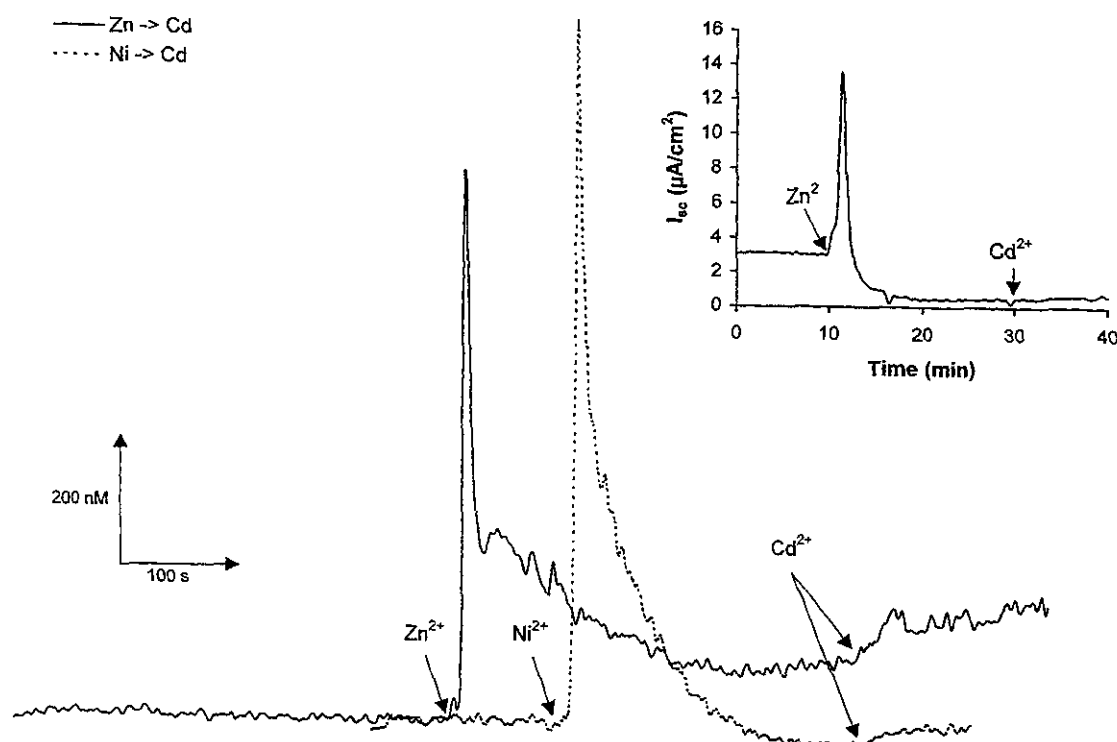
\*  $p < 0.05$ , \*\*  $p < 0.01$ , \*\*\*  $p < 0.001$  compared with control.

**Table 5.3.** Effects of various compounds on  $\text{Cd}^{2+}$ -stimulated  $\text{Cl}^-$ -secretion expressed as  $\Delta F_{\text{Cd}}/F_0 \cdot \text{min}^{-1} (\times 10^3)$  and change in  $\text{Cl}^-$ -concentration pr. min,  $[\Delta \text{Cl}^-]_{\text{Cd}}$  compared with cells only exposed to  $\text{Cd}^{2+}$  ( $\Delta F_{\text{control}}$ ) or untreated cells ( $\Delta F_{\text{basal}}$ ). Cells were loaded with 5 mM SPQ as specified in Materials and fluorescence was measured under chloride-free extracellular conditions on a spectrophotometer.  $\text{Zn}^{2+}$ ,  $\text{Ni}^{2+}$  and TG were used to define interactions with  $\text{Cd}^{2+}$ . Test agents were compared either with  $\Delta F_{\text{control}}$  (statistic significance marked as \*) or with  $\Delta F_{\text{basal}}$  (statistic significance marked as ‡). Data shown are mean values  $\pm$  SE. Reproduced from manuscript VI.

	Test agents						$\Delta F_{\text{basal}}$ (n = 32)
	$\Delta F_{\text{control}}$ (n = 10)	$\text{Zn}^{2+}$ (n = 3)	$\text{Ni}^{2+}$ (n = 3)	TG (n = 4)	FFA (n = 5)	NFA (n = 3)	
$\Delta F_{\text{Cd}}/F_0 \cdot \text{min}^{-1} (\times 10^3)$	$24.48 \pm 3.97$	$3.28 \pm 1.22$ ***	$6.54 \pm 0.96$ ***	$2.66 \pm 1.24$ ***/‡	$4.29 \pm 1.35$ ***/‡	$3.15 \pm 0.58$ ***	$10.49 \pm 0.84$
$[\Delta \text{Cl}^-]_{\text{Cd}} (\mu\text{M} \cdot \text{min}^{-1})$	$-1050.0 \pm 154.5$	$-163.7 \pm 68.5$ */‡	$-225.7 \pm 38.6$ ***/‡	$-108.3 \pm 48.2$	$-185.7 \pm 55.9$ **/‡‡	$-102.9 \pm 19.6$ */‡	$-523.3 \pm 42.7$

\*  $p < 0.05$ , \*\*  $p < 0.01$ , \*\*\*  $p < 0.001$  compared with  $\Delta F_{\text{control}}$ , ‡  $p < 0.05$ , ‡‡  $p < 0.01$  compared with  $\Delta F_{\text{basal}}$ .

Thus, the interaction study revealed that  $\text{Zn}^{2+}$ ,  $\text{Ni}^{2+}$  and  $\text{Cd}^{2+}$  most likely induce  $\text{Cl}^-$  secretions in A6 cells by similar mechanisms as the responses were very similar to those observed for  $\text{Cd}^{2+}$ . Therefore, parallel experiments, where the endpoint is intracellular  $\text{Ca}^{2+}$  were performed, as  $\text{Ca}^{2+}$  mobilization is likely to play an important role in  $\text{Cd}^{2+}$ -mediated  $\text{Cl}^-$  secretion. Hence, both metals induced  $\text{Ca}^{2+}$ -mobilization in a  $\text{Cd}^{2+}$ -like fashion, i.e. they too displayed transient characteristics with a very fast kinetic (figure 5.10). In fact, both metals (400  $\mu\text{M}$ ) were more potent inducers than  $\text{Cd}^{2+}$ ; peak-levels for  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$  were  $1116 \pm 210$  nM (n = 7) within  $14 \pm 1$  seconds and  $868 \pm 119$  nM (n = 5) within  $16 \pm 2$  seconds, respectively. This corresponds to peak/basal-ratios of  $14.0 \pm 2.7$  and  $11.0 \pm 1.8$ , respectively and was about twofold higher than the corresponding  $\text{Cd}^{2+}$ -level of  $6.1 \pm 0.6$  (n = 23). Pretreatment with either  $\text{Zn}^{2+}$  or  $\text{Ni}^{2+}$  prevented the  $\text{Cd}^{2+}$ -inducible  $\text{Ca}^{2+}$ -increases normally observed with  $\text{Zn}^{2+}$  being the most potent cancelling metal. Hence,  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$  reduced the peak/basal-ratio of  $\text{Cd}^{2+}$  to  $0.3 \pm 0.1$  and  $0.8 \pm 0.1$  (n = 4 in both cases), respectively. These data confirm and extend the previous findings in the sense that the similar metals  $\text{Cd}^{2+}$ ,  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$  evoke  $\text{Ca}^{2+}$  transients and  $\text{Cl}^-$ -secretion in A6 cells by similar mechanisms.



**Figure 5.10.** Interactions between  $\text{Cd}^{2+}$  and the two related metals,  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$ . Both  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$  (both  $400 \mu\text{M}$ ) displayed time-courses very alike those observed when A6 cells are exposed to  $400 \mu\text{M}$   $\text{Cd}^{2+}$  (see figure 5.9 for comparisons). Pretreatment with either  $\text{Zn}^{2+}$  or  $\text{Ni}^{2+}$  prevented the  $\text{Cd}^{2+}$ -induced  $\text{Ca}^{2+}$ -increases normally observed suggesting that both metals evoke  $\text{Ca}^{2+}$  transients and  $\text{Cl}^-$ -secretion in A6 cells by similar mechanisms. Inserted: typical time-course of an  $I_{\text{sc}}$ -experiment when  $\text{Cd}^{2+}$  was added to preexposed  $\text{Zn}^{2+}$ -treated cells. Note that  $\text{Zn}^{2+}$  induced  $I_{\text{sc}}$  increases very similar to what was observed for  $\text{Cd}^{2+}$  and the similarity with  $\text{Ca}^{2+}$ -measurements (see results and discussion for further details). Modified and reproduced from manuscript VII.

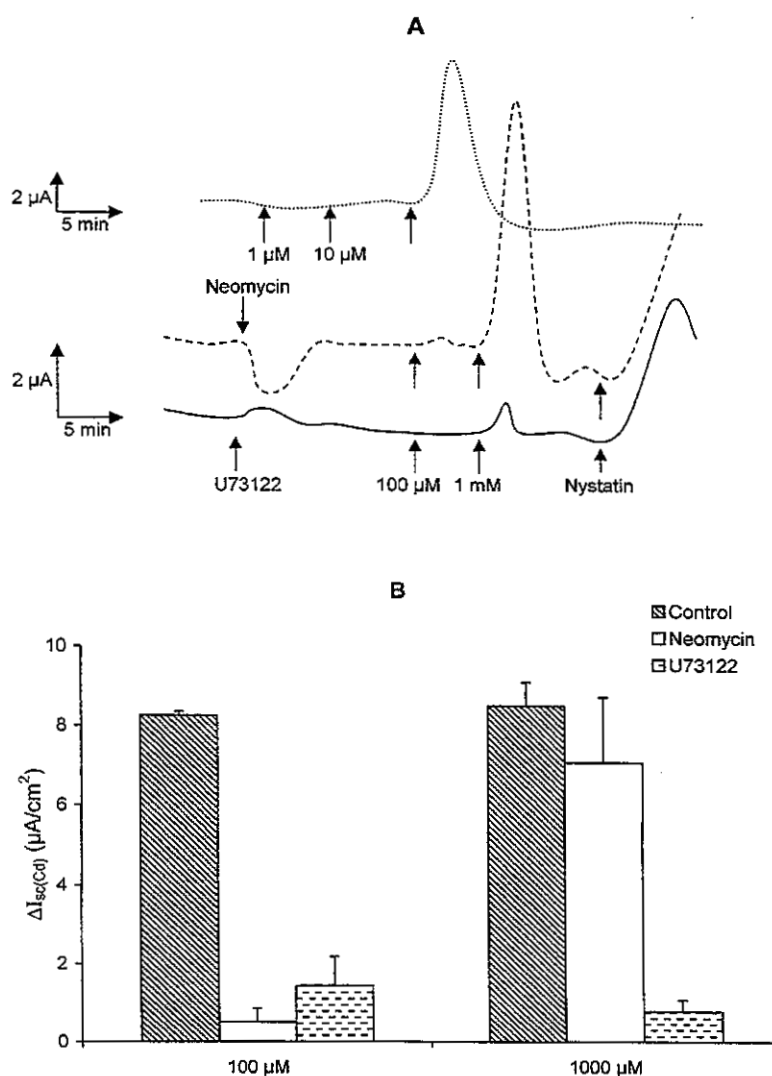
### 5.9. CaR-involvement (V & VII)

To examine how  $\text{Cd}^{2+}$  may cause  $\text{Ca}^{2+}$ -mobilization, the possible activation of CaR was studied. CaR belongs to the seven-pass type of receptor, which upon ligand-binding (through the G-protein cascade) activates PLC leading to increased levels of  $\text{IP}_3$  (see Introduction for further details about the CaR). Therefore, if  $\text{Cd}^{2+}$  (and  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$ ) serves as a CaR-ligand, modulation of PLC-mediated activation and increased  $\text{IP}_3$ -levels are to be expected.

#### PLC-inhibitors

The involvement of PLC-dependent activation of  $\Delta I_{\text{sc(Cd)}}$  was examined by using U73122, a membrane permeable aminosteroid that blocks the phosphatidylinositol-specific PLC (Hildebrandt *et al.*, 1997). As shown in figure 5.11, preexposure of confluent A6 cell monolayers to  $10 \mu\text{M}$  U73122 at the basolateral side resulted in almost total cancellation of  $\Delta I_{\text{sc(Cd)}}$  at both  $100 \mu\text{M}$   $\text{Cd}^{2+}$  and  $1 \text{ mM}$   $\text{Cd}^{2+}$  as  $\Delta I_{\text{sc(Cd)}}$  was diminished to  $17.4 \pm 9.0 \%$  and  $9.3 \pm 3.5 \%$  of control level, respectively ( $n = 4$  and  $p < 0.01$  in both cases). Further experiments were carried out with

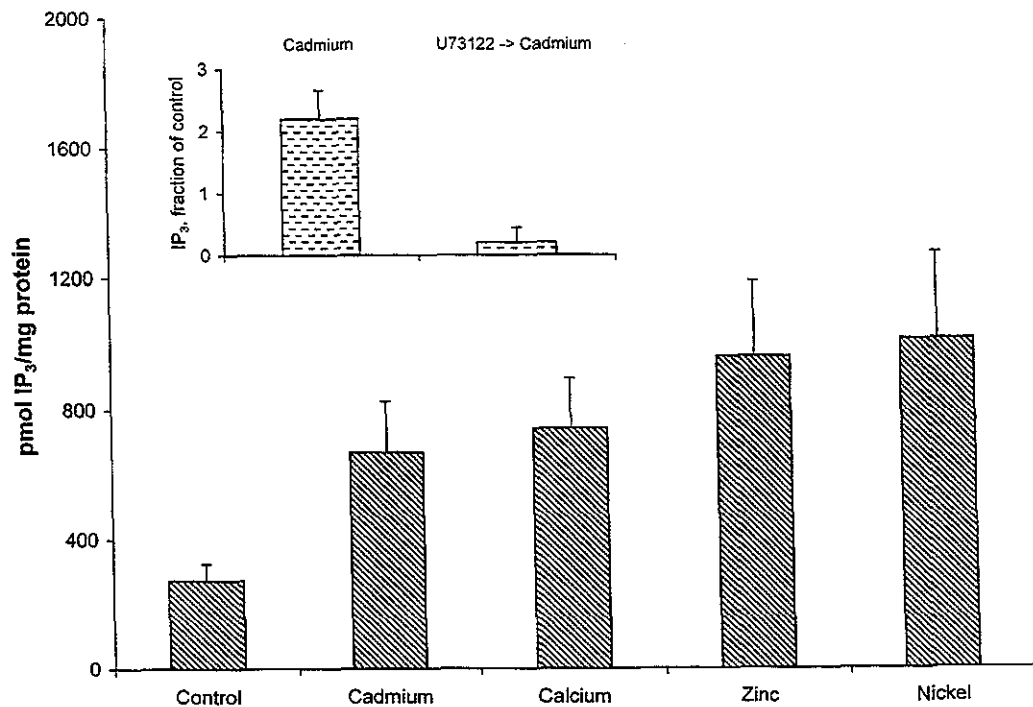
neomycin, an aminoglycoside antibiotic that has often been used as an inhibitor of PLC-mediated signalling processes (Hildebrandt *et al.*, 1997; Sipma *et al.*, 1996). Pretreatment with 500  $\mu\text{M}$  neomycin completely abolished  $\Delta I_{\text{sc(Cd)}}$  at 100  $\mu\text{M}$  of  $\text{Cd}^{2+}$ -exposure as  $\Delta I_{\text{sc(Cd)}}$  was diminished to  $6.3 \pm 4.1\%$  ( $n = 3$ ,  $p < 0.01$ ). However, at 1000  $\mu\text{M}$   $\text{Cd}^{2+}$  neomycin did not affect  $\Delta I_{\text{sc(Cd)}}$  compared with cells not pretreated with neomycin (figure 5.11) suggesting that neomycin is not as potent or specific a PLC-inhibitor as U73122.



**Figure 5.11.** (A). Typical time course showing the effects of the PLC-inhibitors, U73122 (full line) and neomycin (punctuated line) on basolateral  $\text{Cd}^{2+}$ -induced  $I_{\text{sc}}$  ( $I_{\text{sc(Cd)}}$ ). The control response at 0 to 100  $\mu\text{M}$   $\text{Cd}^{2+}$  is illustrated as the upper dotted line. U73122 and neomycin were added to the basolateral side of the A6 cell monolayers at 10  $\mu\text{M}$  and 500  $\mu\text{M}$ , respectively. The apical membrane was permeabilized by nystatin (300 U/ml) to illustrate that the basolateral membrane transport still was intact. (B). Bar diagram displaying the effect of U73122 (10  $\mu\text{M}$ ) and neomycin (500  $\mu\text{M}$ ) on  $\Delta I_{\text{sc(Cd)}}$  at concentrations of 100  $\mu\text{M}$  and 1000  $\mu\text{M}$   $\text{Cd}^{2+}$ , respectively. U73122 suppresses  $\Delta I_{\text{sc(Cd)}}$  both at 100  $\mu\text{M}$  and 1000  $\mu\text{M}$  whereas neomycin only suppresses  $\Delta I_{\text{sc(Cd)}}$  at 100  $\mu\text{M}$   $\text{Cd}^{2+}$ .  $n$ -values are as follows for control, neomycin and U73122 at 100  $\mu\text{M}$ ; 4, 3, 4 and at 1000  $\mu\text{M}$ ; 24, 4, 4. Reproduced from manuscript VII.

Using U73122 and neomycin in  $\text{Ca}^{2+}$ -measurements demonstrated that 10  $\mu\text{M}$  U73122 partially suppressed  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  at 400  $\mu\text{M}$  and totally at 100  $\mu\text{M}$ . Thus, pretreatment with U73122 and subsequent addition of 100  $\mu\text{M}$   $\text{Cd}^{2+}$  caused  $[\text{Ca}^{2+}]_{\text{i}}$  to fall from  $503 \pm 106$  nM ( $n = 4$ ) in control cells to  $69 \pm 16$  nM ( $n = 3$ ,  $p < 0.05$ ). Even at a concentration of 400  $\mu\text{M}$   $\text{Cd}^{2+}$  the peak/basal-ratio was significantly higher in control cells than in U73122-treated cells as the ratio fall from  $6.1 \pm 0.6$  ( $n = 23$ ) to  $2.1 \pm 0.9$  ( $n = 3$ ,  $p < 0.05$ ), respectively. Neomycin was an even more potent inhibitor of  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  than U73122 as 250  $\mu\text{M}$  neomycin almost cancelled the control response at 400  $\mu\text{M}$   $\text{Cd}^{2+}$ . Hence,  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  dropped from  $579 \pm 61$  nM ( $n = 23$ ) in control cells to  $50 \pm 13$  nM ( $n = 5$ ) in neomycin preexposed cells ( $p < 0.001$ ) corresponding to peak/basal-ratios of  $6.1 \pm 0.6$  and  $0.4 \pm 0.1$ , respectively. These data suggest that  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  is dependent upon PLC-sensitive pools with neomycin being the most potent inhibitor of  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  at the given concentrations used. Please refer to manuscript VII for graphics.

### *IP<sub>3</sub>-generation*



**Figure 5.12.** IP<sub>3</sub>-accumulation in A6 cells when exposed for 60 seconds to 1.4 mM  $\text{Ca}^{2+}$  (1 mM  $\text{Ca}^{2+}$  present in the medium) and 400  $\mu\text{M}$   $\text{Cd}^{2+}$ ,  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$  obtained from 4, 18, 8 and 8 experiments, respectively. All cations increased the IP<sub>3</sub>-content significantly compared with the non-treated control cells. Inserted: when cells were preexposed to 5  $\mu\text{M}$  of the PLC-inhibitor, U73122 for 2 min the  $\text{Cd}^{2+}$ /control-ratio of IP<sub>3</sub>-accumulation was 0.2  $\pm$  0.2 ( $n = 4$ ) showing that U73122 did not influence the resting level but also that U73122 could completely suppress the  $\text{Cd}^{2+}$ -induced IP<sub>3</sub>-generation as  $\text{Cd}^{2+}$ /control-ratio in non-treated cells increased to  $2.2 \pm 0.5$  ( $n = 3$ ). Data are expressed as mean  $\pm$  SE. Modified and reproduced from manuscript VII.

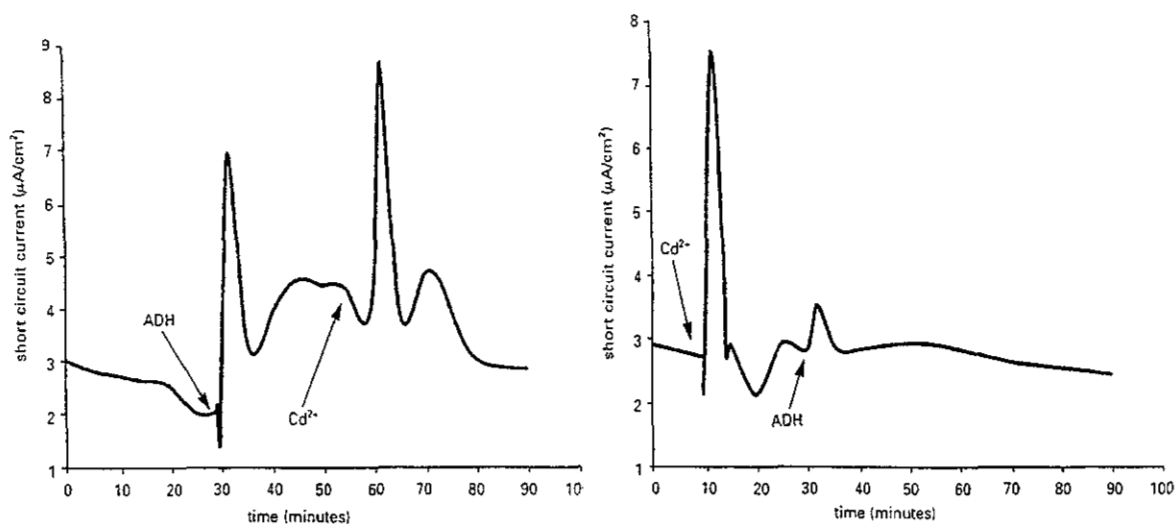
Resting IP<sub>3</sub>-levels, measured with the receptor binding assay, were  $272.2 \pm 51.7$  pmol  $\cdot$  mg protein in A6 cell suspension. All the tested cations could increase the IP<sub>3</sub>-content significantly above control level (figure 5.12). Hence, activation of the cells for 60 sec with 400  $\mu\text{M}$   $\text{Ca}^{2+}$ ,

$\text{Cd}^{2+}$ ,  $\text{Zn}^{2+}$ ,  $\text{Ni}^{2+}$  increased the  $\text{IP}_3$ -content significantly to  $740.1 \pm 153.2$  ( $n = 4$ ,  $p < 0.05$ ),  $668.2 \pm 156.6$  ( $n = 18$ ,  $p < 0.02$ ),  $957.6 \pm 229.0$  ( $n = 8$ ,  $p < 0.01$ ) and  $1008.9 \pm 263.3$  pmol  $\cdot$  mg $^{-1}$  ( $n = 8$ ,  $p < 0.001$ ) in comparison with the resting level. Preincubation of cells with the U73122 (5  $\mu\text{M}$ ) for 2 min completely suppressed  $\text{Cd}^{2+}$ -induced  $\text{IP}_3$ -generation (figure 5.12, inserted). Thus, the  $\text{Cd}^{2+}$ /control-ratio of  $\text{IP}_3$ -accumulation increased to  $2.2 \pm 0.5$  ( $n = 4$ ) whereas U73122 pretreated cells demonstrated a  $\text{Cd}^{2+}$ /control-ratio of  $0.2 \pm 0.2$  ( $n = 3$ ). This suggests that U73122 function as an effective inhibitor of PLC since the  $\text{IP}_3$ -level was not different from the resting level. Moreover, these data show that U73122 is a potent inhibitor of  $\text{Cd}^{2+}$ -inducible  $\text{IP}_3$ -generation.

### 5.10. $\text{Cd}^{2+}$ -AVT interactions (III)

The amphibian antidiuretic hormone AVT stimulates  $I_{\text{sc}}$  in A6-epithelia by evoking a bi-phasic response (see figure 5.13, left figures), where the first  $I_{\text{sc}}$ -stimulation consists of  $\text{Cl}^-$  secretion entirely ( $\text{AVT}_1$ ) and the second  $I_{\text{sc}}$ -stimulation consists of both  $\text{Cl}^-$  secretion and  $\text{Na}^+$  absorption ( $\text{AVT}_2$ ) (Bjerregaard, 1995; Chalfant, 1993).

Addition of 1 mM  $\text{Cd}^{2+}$  to the basolateral surface markedly inhibited AVT-induced (50 nM) increase in  $I_{\text{sc}}$  (figure 5.13, right figure). In four experiments,  $\text{Cd}^{2+}$  inhibited  $\text{AVT}_1$  from  $6.5 \pm 1.3$  to  $1.2 \pm 0.3$   $\mu\text{A}/\text{cm}^2$  ( $p < 0.01$ ) and  $\text{AVT}_2$  from  $5.0 \pm 0.5$  to  $0.6 \pm 0.1$   $\mu\text{A}/\text{cm}^2$  ( $p < 0.001$ ). It is generally accepted that cAMP, a product of AC activity, serves as an intracellular second messenger for AVT (and ADH) by inducing an increase in the ion permeability of the apical membrane in distal epithelial cells (see introduction for further details) (Hays, 1996; Verrey, 1994; Zeiske *et al.*, 1998). Activation of phosphodiesterase (PDE) assures restoration of the intracellular concentration of cAMP (Taylor & Palmer, 1982). To decide if the  $\text{Cd}^{2+}$ -induced inhibition of AVT-stimulated  $I_{\text{sc}}$  was related to an inhibition of enzymes involved in cAMP metabolism, the activity of AC and PDE were measured. The overall results were that  $\text{Cd}^{2+}$  inhibited the AC-activity whereas the PDE-activity was unaffected, which accordingly suggests that the mechanism by which  $\text{Cd}^{2+}$  inhibits AVT-induced  $I_{\text{sc}}$  could be through deprivation of AC-activity.



**Figure 5.13.** Left: Control response of AVT (50 nM) and subsequent addition of 1 mM  $\text{Cd}^{2+}$ . Note the  $\text{AVT}_1$  and  $\text{AVT}_2$  top. Right: Control response of 1 mM  $\text{Cd}^{2+}$  and subsequent addition of 50 nM AVT. Cadmium and AVT were added to the basolateral surface of A6 monolayers. Reproduced from article III.

### 5.11. Additional results

#### *Effect of $\text{Cd}^{2+}$ on $\text{Na}^+-\text{K}^+-\text{ATPase}$ activity (unpublished data)*

In a pilot study nystatin was used as indicator of *in vitro*  $\text{Na}^+-\text{K}^+-\text{ATPase}$  activity. Because nystatin-mediated apical permeabilization causes an influx of ions (primary  $\text{Na}^+$ ), the measured active ion transport corresponds to the activity of  $\text{Na}^+-\text{K}^+-\text{ATPase}$ . Hence,  $\Delta I_{sc(\text{Nys})}$  ( $\Delta I_{sc}$  when nystatin was added) is proportional to  $\text{Na}^+-\text{K}^+-\text{ATPase}$  activity (see Methods for further details and article IV for examples of nystatin-induced  $I_{sc}$ ). Ouabain pretreated monolayers were used to determine the lowest  $\Delta I_{sc}$  ( $\Delta I_{sc(\text{Oua})}$ ) obtainable activity due to the specific inhibition of  $\text{Na}^+-\text{K}^+-\text{ATPase}$ . When 1 mM  $\text{Cd}^{2+}$  was added to the basolateral surface of A6 monolayers,  $\Delta I_{sc(\text{Nys})}$  was  $10.4 \pm 0.9 \mu\text{A}/\text{cm}^2$ , which was insignificantly different from the control value of  $9.2 \pm 1.9 \mu\text{A}/\text{cm}^2$  where nystatin was added to the apical surface after 30 min. (table 5.4). Thus, the results show that *in vitro* measurements of  $\text{Na}^+-\text{K}^+-\text{ATPase}$  activity is unaffected by 1 mM  $\text{Cd}^{2+}$  added to the basolateral surface.

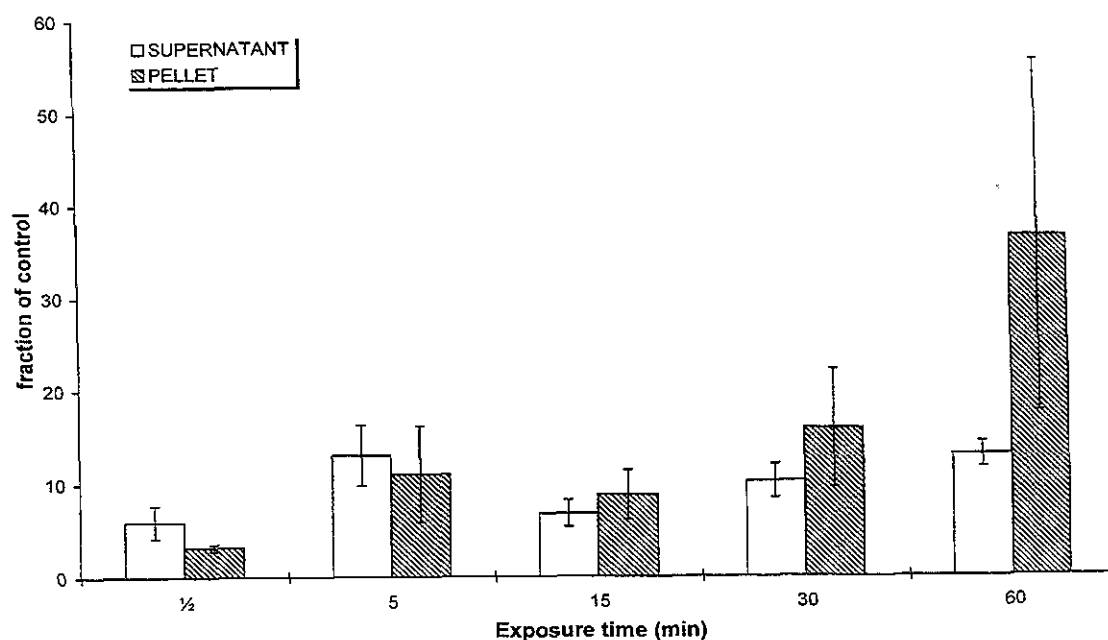
**Table 5.4.** Effect of  $\text{Cd}^{2+}$  on  $\text{Na}^+-\text{K}^+-\text{ATPase}$  activity using nystatin-induced  $I_{sc}$ . The monolayers were exposed to 1 mM  $\text{Cd}^{2+}$  for 30 min and then permeabilized by nystatin (300 U/ml) added to the apical surface. The change  $I_{sc}$  ( $\Delta I_{sc(\text{Nys})}$ ) followed by the addition of nystatin was corrected for the lowest obtainable  $\text{Na}^+-\text{K}^+-\text{ATPase}$  activity ( $\Delta I_{sc(\text{Oua})}$ ) achieved by the addition of 100  $\mu\text{M}$  ouabain before measuring  $\Delta I_{sc(\text{Nys})}$ . Data are expressed as mean  $\pm$  SE.

Effect of $\text{Cd}^{2+}$ on nystatin-induced $I_{sc}$			
Treatment	$\Delta I_{sc(\text{Nys})}$ in $\mu\text{A}/\text{cm}^2$	% of control*	n
Control	$9.2 \pm 1.9$	100	4
Cadmium	$10.4 \pm 0.9$	$113.0 \pm 9.8$	6

\*All values were corrected for ouabain  $\Delta I_{sc(\text{Oua})}$  of  $5.4 \pm 0.9$  (n = 7) before calculation of % of control.

#### *$^{109}\text{Cd}^{2+}$ isotope studies (unpublished data)*

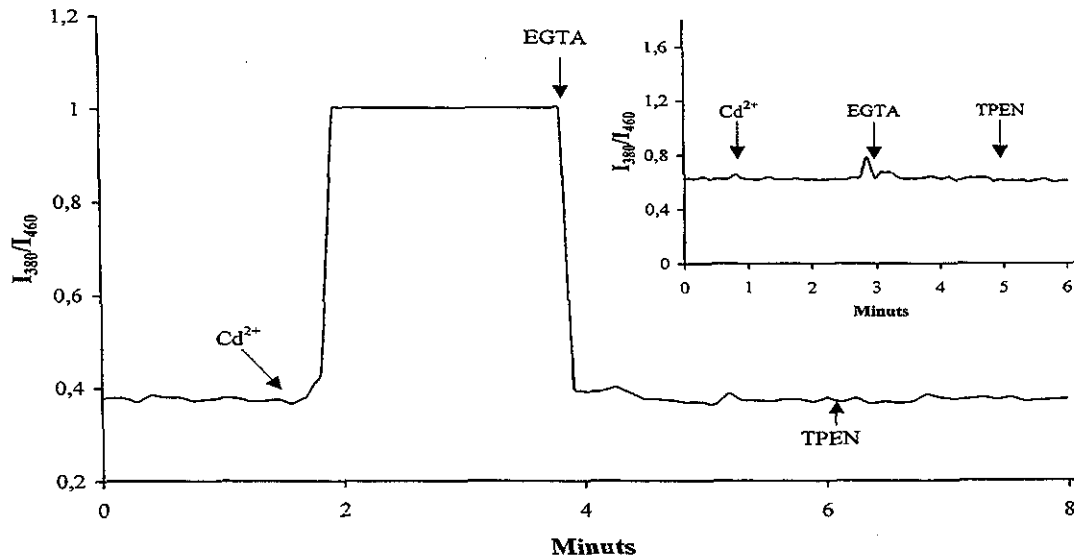
In a pilot study the compartmentalization of  $\text{Cd}^{2+}$  in A6 cells was analysed using  $^{109}\text{Cd}^{2+}$ -isotope.  $^{109}\text{Cd}^{2+}$  of known specific activity was added to A6 cell suspensions at predefined intervals. At a given time surplus of the  $\text{Cd}^{2+}$ -chelator EGTA was added and the cells washed to stop the flux of  $^{109}\text{Cd}^{2+}$  (see Methods for further details). The cell suspension was then homogenized and fractionated into a pellet and supernatant fraction. Results of  $\gamma$ -counting the samples are shown in figure 5.14. In the supernatant fraction, the mean of three experiments were  $3.3 \pm 0.3$ ,  $9.7 \pm 3.9$ ,  $8.8 \pm 1.7$ ,  $12.6 \pm 5.0$  and  $27.1 \pm 17.2$  pmol/mg protein for 1/2, 5, 15, 30 and 60 minutes of exposure, respectively. The corresponding results for the pellet fraction were  $3.2 \pm 0.4$ ,  $11.0 \pm 5.1$ ,  $8.7 \pm 2.7$ ,  $15.8 \pm 6.3$  and  $36.5 \pm 19.0$  pmol/mg protein for 1/2, 5, 15, 30 and 60 minutes of exposure, respectively. Statistic LSD-test revealed significant difference between 1/2 and 60 minutes of exposure in the pellet fraction ( $p < 0.05$ ) suggesting that  $\text{Cd}^{2+}$  primarily accumulates in the plasma membrane within measuring time.



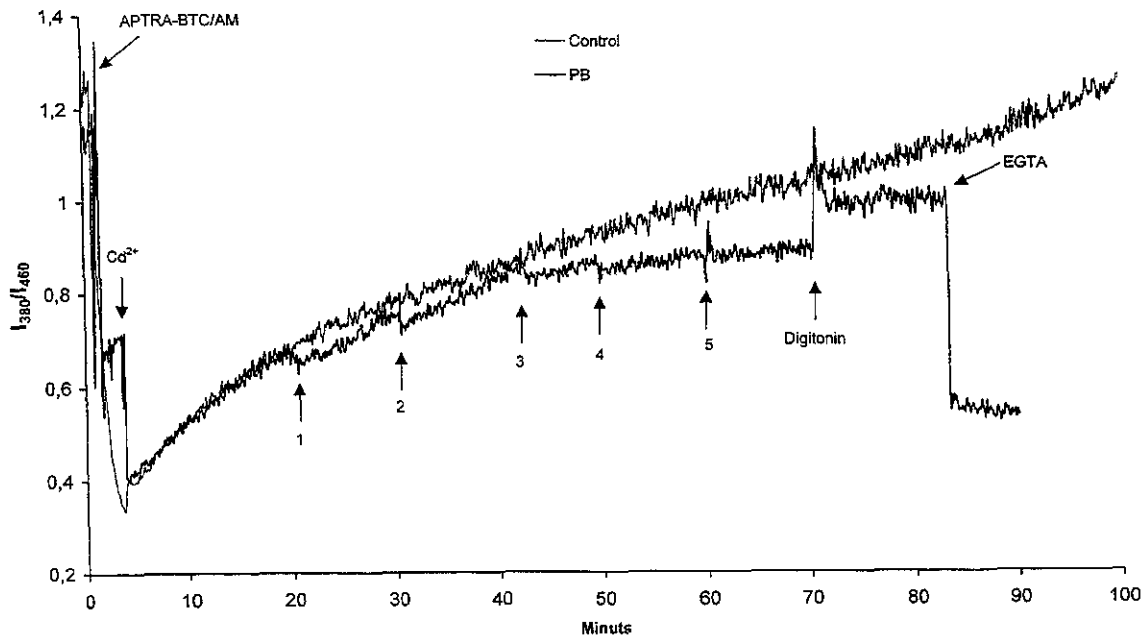
**Figure 5.14.**  $\text{Cd}^{2+}$  accumulation in supernatant and pellet fraction in A6 cell suspensions. Cells were exposed with  $400 \mu\text{M } ^{109}\text{Cd}^{2+}$  for time periods indicated in the figure. The accumulation is given as  $\text{pmol Cd}^{2+} \cdot \text{mg}^{-1} \text{ protein}$  and then compared with control level, i.e. no  $\text{Cd}^{2+}$  exposure ( $n = 3$ ). Data are expressed as mean  $\pm$  SE. There was significant difference between  $\frac{1}{2}$  and 60 minutes of exposure in the pellet fraction ( $p < 0.05$ ).

#### *Multi-drug activity in A6 cells (unpublished data)*

In a pilot study the  $\text{Cd}^{2+}$ -specific fluorescence probe, APTRA-BTC/AM, was used to determine transport of  $\text{Cd}^{2+}$  across A6 epithelial membranes (the loading technique is presented in Methods). Figure 5.15 illustrates a typical response, when APTRA-BTC/AM-loaded A6 cells were exposed to  $400 \mu\text{M Cd}^{2+}$ .  $\text{Cd}^{2+}$  evoked a prompt increase in fluorescence as expected if  $\text{Cd}^{2+}$  binds to APTRA-BTC, however, 4.5 mM EGTA could reverse the increase. This indicates that all the dye has been processed (the AM-form does not bind  $\text{Cd}^{2+}$  - see figure 5.15, inserted) and then transported to the extracellular face, where EGTA, which is membrane impermeable, chelated  $\text{Cd}^{2+}$  bound to the probe. Multi-drug-resistance proteins (MDR) are known transporters of a variety of agents, including fluorescence dye (Draper *et al.*, 1997; Essodaigui *et al.*, 1998; Mitsui *et al.*, 1993). Therefore, to decide if MDR-activity was involved in the possible dye extrusion, probenecide and sulfinpyrazone, both known as MDR-inhibitors, were used (Di Virgilio *et al.*, 1990; Gollapudi *et al.*, 1997). When APTRA-BTC/AM and  $\text{Cd}^{2+}$  were added to cell suspensions a distinct and steady increase in fluorescence was observed (figure 5.16), which was blockable by both probenecide and sulfinpyrazone. Only the time course of probenecide is illustrated in figure 5.16, but the time course for sulfinpyrazone is similar. Moreover, the blocking effect was dose-dependent and  $\text{IC}_{50}$ -values could be calculated. Thus, the  $\text{IC}_{50}$ -values corresponded to  $685 \pm 206 \mu\text{M}$  ( $n = 5$ ) and  $3.3 \pm 0.2 \text{ mM}$  ( $n = 6$ ) for sulfinpyrazone and probenecide, respectively. Overall, this may suggest that the MDR-activity is responsible for the extrusion of APTRA-BTC as will be discussed in a restricted manner in the Discussion due to ongoing patent considerations.



**Figure 5.15.** Typical recording of fluorescence of APTRA-BTC/AM-loaded cell suspensions.  $\frac{1}{2}$  ml cell suspension was incubated for 60 min with  $5 \mu\text{M}$  APTRA-BTC/AM. Fluorescence measured at  $I_{380}/I_{460}$  increased promptly when  $400 \mu\text{M}$   $\text{Cd}^{2+}$  was added, and was restored by  $4.5 \text{ mM}$  EGTA. Subsequent addition of the chelator, TPEN ( $50 \mu\text{M}$ ), did not affect fluorescence indicating that the dye was present in the extracellular phase. Inserted figure: same conditions as described for the main figure but cells were replaced by water. Thus, when cells are absent APTRA-BTC/AM is not cleaved to its active form, APTRA-BTC why addition of  $\text{Cd}^{2+}$  do not affect fluorescence.



**Figure 5.16.** Bottom curve: A typical dose-response experiment, where increasing concentrations of the MDR-inhibitor probenecid (PB) is accompanied by decreasing slopes. APTRA-BTC/AM ( $170 \text{ nM}$ ) was added to the cell suspension at time zero. Two minutes later  $400 \mu\text{M}$   $\text{Cd}^{2+}$  was added, upon which the fluorescence dropped promptly and then increased in intensity, which was blockable by PB. Figures on top of curve correspond to concentrations of PB added in mM. Concentrations of digitonin =  $12.5 \mu\text{M}$  and EGTA =  $3.6 \text{ mM}$ . Top curve: control experiment. APTRA-BTC/AM and  $\text{Cd}^{2+}$  were added as indicated but PB was not used.



#### *Cisplatin experiments (IV)*

The present results, which are based on collaboration with master students during autumn 1996, will be presented and discussed only shortly. For detailed information please refer to the specific article in the appendix.

Cisplatin is an antitumour agent with extensive nephrotoxicity. Accordingly, the goal of the present study in A6 cells was to clarify the mechanism behind cisplatin induced nephrotoxicity in the distal nephron.  $I_{50}$ -measurement revealed that the effects were extremely side-specific, as  $I_{50}$ -values were 49 and 540  $\mu\text{M}$  for basolateral or apical 24 h-exposure, respectively. Moreover,  $I_{sc}$  declined in a dose-dependent way that for the highest concentration (800  $\mu\text{M}$ ) resembled the one observed for ouabain suggesting that cisplatin interferes with the  $\text{Na}^+\text{-K}^+\text{-ATPase}$ . Hence, studies of  $\text{Na}^+\text{-K}^+\text{-ATPase}$  activity using nystatin (see above for details about the technique) demonstrated that 800  $\mu\text{M}$  cisplatin inhibited the pump by 50% after 60 minutes of exposure.

## 6. OVERALL DISCUSSION

The present thesis deals with the basolateral effects of cadmium on cellular and cytotoxic mechanisms when administered to renal distal epithelial A6 culture cells. The subject is untraditional in the sense that the thesis focus on basolateral-related cellular events in the distal nephron and not apical-related effects in the proximal nephron as often done. Moreover, rather high doses of  $\text{Cd}^{2+}$  was used to achieve maximum response. Hence this study can be considered as a “functional study” trying to elucidate mechanisms behind the observed  $\text{Cd}^{2+}$ -evoked intracellular events, which was only possible using doses near or at the maximum response concentration, i.e. 1 mM  $\text{Cd}^{2+}$ . Nevertheless, along with the discussion of the above mentioned considerations, the following discussion will also deal with aspects concerning the physiological and pathophysiological relevance of the presented studies.

Human beings are continuously exposed to cadmium, primarily through inhalation and food intake (see chap. 3.2 and 3.3). Measurements between 1983-1987 demonstrated that the average weekly intakes of cadmium among the Danish population was about 140  $\mu\text{g}$ , which corresponds to 30% of PTWI (the Danish EPA, publication No. 187, 1990). Due to variation in the population, the Danish EPA estimates that a small group of Danes have intakes of 50% of PTWI, which the Danish EPA consider to be unacceptably high. Thus, even though Denmark can be considered a “low-level” country due to the absence of important exposure sources of cadmium, e.g. mining, manufactory etc. still some citizens have high exposures not far from the PTWI. Probably, citizens near PTWI should be found among smokers as cigarettes significantly contributes to the overall cadmium intake. Lifelong ingestion and inhalation of cadmium give rise to concern because cadmium accumulates in the organs, especially the kidneys (see chap. 3.4). The kidney plays a very important role in the homeostasis of electrolytes and water balance and as such clinical symptoms are often related to disturbances of the homeostatic function of the kidney, e.g. chronic exposures of cadmium among workers leads to proteinuria, hypercalciuria, phosphaturia and recurrent kidney stone formation (see chap. 3.5). Overall, examination of cadmium-related effects are of main interest because of the constant exposure of human beings that in some parts of the world is expected to be near or above the PTWI (see table 3.2), and the fact that the clinical symptoms are more or less known, but the underlying mechanisms are largely unknown. Hence, mechanistic studies of cadmium-induced nephrotoxicity are therefore clearly necessary.

Renal toxicity following prolonged exposure to cadmium is characterized primarily by proteinuria and other disturbances of solute transport that reflect diminished proximal tubule function (Friedman, 1994). In proximal tubule the low molecular weight, Cd-MT, is readily filtered through the glomeruli and taken up by tubular reabsorption whereupon cadmium enters the lysosomes of the tubular cells. Like other proteins, Cd-MT is degraded in the lysosomes and free  $\text{Cd}^{2+}$  is released to react with sensitive sites in the cell (Nordberg, 1992). Thus, when it comes to cadmium-induced damage in the proximal tubule, the knowledge is present but the intracellular mechanisms needs still to be explored. Contrary to this, the focus on cadmium-induced damage of the distal segment is almost lacking. However, hormonal and pharmacologically regulated transport of solutes (exclusively for  $\text{Ca}^{2+}$ ) and water takes place almost entirely in distal and connecting tubules (see chap. 3.8), which makes the cadmium-distal-interactions even more interesting to explore. Accordingly, studies indicate that cadmium may act as an distal nephron toxicant, e.g.; 1) in immortalized distal convoluted tubule cells cadmium is taken up (Friedman, 1994), 2) Kidney cell lines of proximal (LLC-PK<sub>1</sub>) and distal (MDCK) tubular origins exposed to cadmium have also demonstrated that not only the proximal cell line but also, however to a lesser extend, the distal cell line accumulated cadmium (Zhang, 1995), 3) Immunohistochemical

localization of cadmium-induced metallothionein in rat kidney revealed intense staining in the distal tubule that was often more intense than in the proximal tubule (Tohyama, 1988; Zhang, 1995) and 4) Indirect evidence suggests that cadmium may be taken up by distal tubules as *in vivo* studies of cadmium-administered rats demonstrated increased excretion of urinary kallikrein, which is predominantly originates from the distal tubules (Girolami, 1989). Consequently, the small attention this topic has received in general and the important role the distal segment plays in hormonal water and electrolyte regulation, warrant a research on the distal effects of cadmium exposure.

The A6 cell line was used in all studies because of its obvious advantages (see chap. 3.9): 1) A6 cells exhibit morphological and functional properties of the mammalian distal epithelium, 2) A6 cells display active and electrogenic  $\text{Na}^+$  and  $\text{Cl}^-$  ion transport and are sensitive to a variety of hormones, e.g. PTH, aldosterone and antidiuretic hormone, 3) A6 cells are grown at room temperature and 4) A6 cells form a polarised, highly differentiated epithelium with a large transepithelial resistance,  $R_{te}$  ( $> 1000 \Omega \cdot \text{cm}^2$ ). In contrary to this, all cell lines representing the proximal tubule, e.g. LLC-PK<sub>1</sub>, have low  $R_{te}$ . Because of high  $R_{te}$ , A6 cells are excellent for investigation of ion transport because high  $R_{te}$  indicates that the paracellular route is negligible allowing only transepithelial transport to occur. Furthermore,  $R_{te}$  serves as a sensitive marker for determination of cell integrity since low levels of  $R_{te}$  suggest that tight junctions are leaky or that the cell membranes are being destroyed. Therefore, this renal cell line provides an excellent model for distal tubular cells in the kidney, useful in studies attempting to characterize mechanisms of transepithelial ion transport and hormone action.

It is commonly believed that Cd-MT complex does not react with the basolateral membrane, whereas cadmium bound to e.g. cysteine or mercaptoethanol are responsible for the transfer of cadmium from peritubular blood to renal epithelia by interaction with anionic cadmium-binding sites on the cell membrane possessing much higher affinity for cadmium than does plasma albumin (Foulkes, 1990). Cadmium interactions with the basolateral membrane (see chap. 3.4) is interesting as the basolateral membrane possesses important potential targets for the maintenance of electrolyte and water balance, such as channels and receptors, by which cadmium due to its large affinity for ligands having -SH residues and nucleophilic sites (Jacobsen, 1980) might interact with. Moreover, the blood level of cadmium is homogenous and therefore one must expect that the "load" of cadmium in the distal tubule equals the exposure in the proximal tubule. Consequently, it was decided to focus on characterizing the mechanisms behind basolateral  $\text{Cd}^{2+}$  exposure only.

The findings suggest that the basolateral membrane is far more sensitive to  $\text{Cd}^{2+}$  exposure than the apical membrane since basolateral  $\text{Cd}^{2+}$  caused  $I_{sc}$  to increase in a transient and prompt manner that was not observed when applied to the apical side. Moreover,  $\Delta I_{sc(\text{Cd})}$  was dose-dependent with a maximal stimulation concentration at 1 mM. The side-specific effect is consistent with cell integrity studies, where basolateral  $\text{Cd}^{2+}$  exposure lowered  $R_{te}$  at much lower doses than observed when  $\text{Cd}^{2+}$  was applied to the apical surface. Similar results were observed in other epithelial cell lines such as Caco-2 (Rossi, 1996) and LLC-PK<sub>1</sub> (Bruggerman, 1992), but with other endpoints than  $R_{te}$ . The heterogenous effects on basolateral and apical  $I_{sc}$  and  $R_{te}$  suggest different mechanisms by which  $\text{Cd}^{2+}$  may disturb ion transport capacity and cause cytotoxic effects in A6 cells.

One of the major goals of the present thesis was to identify the cellular mechanisms behind the distinct  $\Delta I_{sc(\text{Cd})}$ . The observed positive  $I_{sc}$ -deflection upon  $\text{Cd}^{2+}$  treatment of A6 cells is caused by either  $\text{Na}^+$  reabsorption or  $\text{Cl}^-$  secretion. The ionic nature behind  $\Delta I_{sc(\text{Cd})}$  was examined using amiloride, a  $\text{Na}^+$  channel inhibitor. Preexposure to amiloride demonstrated that  $\Delta I_{sc(\text{Cd})}$  was

undiminished showing that  $\text{Na}^+$  transport was not involved in  $\Delta I_{\text{sc}(\text{Cd})}$ . Thus, in order to determine if the  $\text{Cd}^{2+}$ -mediated positive  $I_{\text{sc}}$ -deflection was due to  $\text{Cl}^-$  secretion,  $\text{Cl}^-$  depletion and various  $\text{Cl}^-$  channel inhibitors were taken into use.  $\text{Cl}^-$  depletion and practical all the used inhibitors reduced  $\Delta I_{\text{sc}(\text{Cd})}$  compared with control level, which indirectly proves that  $\text{Cl}^-$  transport is involved in  $\Delta I_{\text{sc}(\text{Cd})}$ . The two fenemates, FFA and NFA both significantly reduced  $\Delta I_{\text{sc}(\text{Cd})}$  with FFA being the most potent inhibitor of all tested inhibitors. Direct measurement of  $\text{Cl}^-$  transport was performed using the  $\text{Cl}^-$ -sensitive fluorescent probe, SPQ to extend and confirm the obtained  $I_{\text{sc}}$ -results. Work under  $\text{Cl}^-$ -free conditions was necessary to obtain maximal driving force for  $\text{Cl}^-$  as also proposed by (Scott *et al.*, 1995). One reasonable explanation for the lack of responsiveness during normal physiological conditions, i.e. in the presence of NRS, is the transient nature of  $\text{Cd}^{2+}$ -activated  $\text{Cl}^-$  transport by which only small amounts of  $\text{Cl}^-$  leave the cells, probably far below the detection level with SPQ.

In the present studies  $\text{Cd}^{2+}$  evoked an increase in  $\text{Cl}^-$ -secretion measured as  $\Delta F/F_0([\Delta \text{Cl}^-]_{\text{Cd}})$ , which significantly exceeded the basal  $\text{Cl}^-$ -secretion. Moreover,  $\Delta F/F_0$  rapidly reached a plateau level suggesting that the kinetic is fast consistent with the kinetics in  $I_{\text{sc}}$ -experiments. However, under similar conditions, i.e. in the presence of  $\text{Cl}^-$ -free Ringer, no  $\text{Cd}^{2+}$ -evoked  $I_{\text{sc}}$ -transient was observed. The most plausible explanation for the conflicting results is that the cells were bathed in  $\text{Cl}^-$ -free solution for more than 25 minutes before measuring  $\Delta I_{\text{sc}(\text{Cd})}$ . In contrast, determination of  $[\Delta \text{Cl}^-]_{\text{Cd}}$  took place within minutes after starting the  $\text{Cl}^-$ -free protocol. Therefore, the intracellular  $\text{Cl}^-$  content resembles to some extent the physiological level. Preexposure with either FFA or NFA totally blocked the  $\text{Cd}^{2+}$ -induced  $\text{Cl}^-$ -secretion without affecting the level of maximal fluorescence (figure 5.5). This shows that plenty of  $\text{Cl}^-$  ions were trapped inside the cells and that  $\text{Cd}^{2+}$  could not activate  $\text{Cl}^-$ -exit due to the blockage of the apical  $\text{Cl}^-$ -channels by the fenemates. Thus, the  $I_{\text{sc}}$ - and SPQ-results strongly indicate that  $\text{Cd}^{2+}$ -stimulated active ion transport indeed involves transepithelial  $\text{Cl}^-$ -secretion. Only few papers have dealt with the effects of  $\text{Cd}^{2+}$  exposure on  $\text{Cl}^-$  transporting epithelia cells and to my knowledge no one has tried to measure  $\text{Cd}^{2+}$ -evoked  $\text{Cl}^-$ -transport with fluorescence techniques. However,  $\text{Cd}^{2+}$  has been shown to evoke  $\text{Cl}^-$ -secretion in shark rectal gland epithelia via cAMP-dependent mechanisms (Forrest *et al.*, 1997) and in rat colon epithelia via prostaglandines (Böhme *et al.*, 1992).

Among secretory chloride channels two main groups have been described, namely  $\text{Ca}^{2+}$ - and cAMP-regulated channels (Cliff & Frizzell, 1990; Greger, 1996; Guggino, 1994; Simmons, 1993). Apparently, two types (3-pS and 8-pS) of apical chloride channels controlled by  $\text{Ca}^{2+}$  and/or cAMP contribute to the transcellular chloride transport pathway in A6 cells (Marunaka, 1990; Marunaka, 1993; Shintani & Marunaka, 1996; Zeiske *et al.*, 1998). Since FFA and NFA, both known as inhibitors of  $\text{Ca}^{2+}$ -activated  $\text{Cl}^-$  channels (White, 1990), were the most potent inhibitors of  $\Delta I_{\text{sc}(\text{Cd})}$  and  $\text{Ca}^{2+}$ -induced activation of chloride secretion usually results from activation of apical  $\text{Cl}^-$  channels (Niisato & Marunaka, 1997), the involvement of intracellular  $\text{Ca}^{2+}$  in  $\Delta I_{\text{sc}(\text{Cd})}$  was investigated.

Preliminary  $I_{\text{sc}}$ -studies revealed that intracellular  $\text{Ca}^{2+}$  might be an important second messenger in  $\Delta I_{\text{sc}(\text{Cd})}$  as calcium depletion significantly reduced  $\Delta I_{\text{sc}(\text{Cd})}$  compared with control.  $\text{Ca}^{2+}$  mobilization evoked by TG and A23187 almost cancelled  $\Delta I_{\text{sc}(\text{Cd})}$ . Furthermore,  $\text{Cd}^{2+}$  and TG could neutralize each other since neither  $\text{Cd}^{2+}$  nor TG could stimulate  $I_{\text{sc}}$  further when preexposed to the counterpart. Similar responses were obtained in SPQ-loaded cells as TG and  $\text{Cd}^{2+}$  also could neutralise the response of the counterparts. Thus, indirect evidence suggests that  $\text{Ca}^{2+}$ -mobilization is involved in  $\Delta I_{\text{sc}(\text{Cd})}$  why direct measurements of intracellular  $\text{Ca}^{2+}$  using fura-2 was implemented to further characterize  $\text{Cd}^{2+}$ -mediated intracellular events.

Measuring effects of  $\text{Cd}^{2+}$  and other divalent ions on intracellular  $\text{Ca}^{2+}$  homeostasis using fura-2 can be hampered by the fact that  $\text{Cd}^{2+}$  also binds to the probe and mimic the effects of  $\text{Ca}^{2+}$ -binding to the probe (Hinkle, 1992). However, this requires that cadmium enters the cell in its free form. Therefore, the cell suspensions were pre-loaded with the membrane permeable heavy metal chelator TPEN. A pilot study showed that TPEN is actually able to chelate  $\text{Cd}^{2+}$  when the membranes are made permeable to  $\text{Cd}^{2+}$ . Moreover, addition of EGTA demonstrated that fura-2 was not present in the extracellular phase. Otherwise EGTA would, under those conditions, cause fluorescence to decrease immediately. This is expected as the cell suspensions were pre-loaded with probenecide, known as an inhibitor of the organic-anion transporter responsible for dye extrusion (Di Virgilio *et al.*, 1989; Di Virgilio *et al.*, 1990; McDonough & Button, 1989). In fact, another pilot study using the fluorescent probe APTRA-BTC/AM has shown that probenecide in a dose-dependent way abolished the dye extrusion why similar effect on fura-2 extrusion is to be expected. Accordingly, the leak rate of the fura-2 was estimated to be considerably lower than previously reported in A6 cells (Brochiero & Ehrenfeld, 1997) indicating that probenecid actually reduces the leakage rate.

Interestingly, using APTRA-BTC/AM, which is a specific  $\text{Cd}^{2+}$  (and  $\text{Zn}^{2+}$ ) probe, to detect  $\text{Cd}^{2+}$ , offered no evidence for intracellular  $\text{Cd}^{2+}$  (figure 5.15). This suggests that perhaps  $\text{Cd}^{2+}$  does not pass the cell membranes in A6 cells within the time of measurements. In fact, pilot isotope studies support this idea as there was no significant difference in accumulation of  $\text{Cd}^{2+}$  in the cell supernatant, whereas the accumulation was significantly higher in the pellet after 60 minutes of exposure. Thus, the cell membranes of A6 cells might act as a barrier for  $\text{Cd}^{2+}$  intrusion ensuring, in combination with TPEN pre-loading, that  $\text{Cd}^{2+}$  does not interact with the fura-2- $\text{Ca}^{2+}$ -complex. Evidence for that is strong as outlined in the discussion of manuscript VII, e.g. 1)  $\text{Cd}^{2+}$  evoked an immediate transient increase in fluorescence that is not to be expected if  $\text{Cd}^{2+}$  binds to the probe since the fluorescence would remain at high level as observed in ionomycin treated cells, 2) Addition of the heavy chelator, TPEN, showed no effect on  $[\text{Ca}^{2+}]_{\text{Cd}}$  as expected if  $\text{Cd}^{2+}$  were bound to the probe, 3) Dose-response experiments revealed effects only above 10  $\mu\text{M}$ . If an intracellular  $\text{Cd}^{2+}$ -fura-2-complex was present maximum intensity was obtained at much lower concentrations (500 nM  $\text{Cd}^{2+}$  gave maximum binding of fura-Na in pilot experiments), 4) Preexposure with the non-autofluorescence agents neomycin, TMB-8 and TG abolished the  $\text{Cd}^{2+}$ -evoked fluorescence intensity (figure 5.9), which would not occur if  $\text{Cd}^{2+}$  binds to the probe, 5) Depleting the cells for  $\text{Ca}^{2+}$  using TG reduced  $[\text{Ca}^{2+}]_{\text{Cd}}$  significantly, 6) The observed  $\text{Cd}^{2+}$ -evoked  $\text{Ca}^{2+}$ -transients measured with fura-2 resemble  $\text{Cd}^{2+}$ -evoked  $\text{Ca}^{2+}$ -transients measured with  $^{45}\text{Ca}^{2+}$  (Smith, 1989). In the light of this, it can be concluded that the observed effects on fluorescence in fura-2-loaded cells caused by extracellular  $\text{Cd}^{2+}$  are actually due to  $\text{Ca}^{2+}$ -mobilization and not the binding of  $\text{Cd}^{2+}$  to the probe.

It was found that  $\text{Cd}^{2+}$  evoked a  $\text{Ca}^{2+}$  transient in a hormone-like fashion, which has also been observed in human fibroblasts (Smith, 1989) and E367 neuroblastoma cells (Benters, 1997). Since no sustained elevation of the resting  $\text{Ca}^{2+}_i$  was observed the possibility that  $\text{Cd}^{2+}$  simply interferes with the control of  $\text{Ca}^{2+}$  fluxes from outside the cells can be excluded. Furthermore, the very fast response ( $15 \pm 1$  sec) argues against physico-chemical interaction of  $\text{Cd}^{2+}$  with intracellular enzymes, e.g. PLC or  $\text{Ca}^{2+}$ -ATPases because such effects would require penetration of  $\text{Cd}^{2+}$  through the plasma membrane, which is slow. Moreover, inhibition of  $\text{Ca}^{2+}$  extruding systems often results in a sustained elevation of  $\text{Ca}^{2+}_i$ , which is not consistent with the transient nature observed in our studies. Measurements of the  $\text{Na}^+$ - $\text{K}^+$ -ATPase activity using the nystatin technique supports this as  $\text{Cd}^{2+}$  did not inhibit the  $\text{Na}^+$ - $\text{K}^+$ -ATPase activity in A6 cells, which is

indirectly responsible for  $\text{Ca}^{2+}$ -extrusion via the  $\text{Na}^+$ - $\text{Ca}^{2+}$ -exchanger (Friedman, 1998; White *et al.*, 1996).

To define the origin of the  $\text{Ca}^{2+}$ -release caused by  $\text{Cd}^{2+}$ , TG (and TMB-8) was applied to the cell suspensions. Consequently,  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  was almost annulled in cells pretreated with both TG and TMB-8 (VII). The  $\text{Ca}^{2+}_i$ -level was sustained when A6-cells were exposed to TG and subsequent addition of  $\text{Cd}^{2+}$  showed significant lower  $\text{Ca}^{2+}_i$  than what was observed in control cells indicating that intracellular pools are the main source of  $[\text{Ca}^{2+}]_{\text{Cd}}$ . Subsequent addition of TG to  $\text{Cd}^{2+}$ -pretreated cells proved no significant difference in TG-amplitude compared with TG-control level suggesting that  $\text{Cd}^{2+}$ , probably due to the fast and transient nature of  $[\text{Ca}^{2+}]_{\text{Cd}}$  does not empty the  $\text{IP}_3$ -sensitive  $\text{Ca}^{2+}_i$  stores. Interestingly, the kinetic and dose-response characteristics of  $[\text{Ca}^{2+}]_{\text{Cd}}$  correspond with those previously observed under similar conditions in  $I_{\text{sc}}$ -experiments (see figure 5.9 and inserted figure). Accordingly, the same kinetics and dose-response between  $I_{\text{sc}}$ -experiments and fura-2-experiments strongly suggest that  $\text{Cd}^{2+}$ -evoked  $\text{Cl}^-$ -secretion and  $\text{Ca}^{2+}_i$ -mobilization are closely connected. However, the fact that TG is unable to provoke further increases in  $I_{\text{sc}}$  in  $\text{Cd}^{2+}$ -treated A6 cells, but able to increase  $\text{Ca}^{2+}_i$  further following  $\text{Cd}^{2+}$  treatment suggests that  $\text{Cd}^{2+}$ -mediated  $\text{Cl}^-$ -channels responsible for  $\text{Cl}^-$ -secretion become desensitized. Overall, it can be concluded that  $[\text{Ca}^{2+}]_{\text{Cd}}$  originated from intracellular stores.

Transient  $\text{Ca}^{2+}$  responses are often caused by hormone stimulation, which involves binding of the agonist to its plasma membrane receptor, activation of the G-protein coupled PLC, resulting in generation of  $\text{IP}_3$  and diacylglycerol (for reviews see Berridge, 1997; Clapham, 1995; Iino, 1999). Thus, to investigate if  $[\text{Ca}^{2+}]_{\text{Cd}}$  involves hormonal signalling, experiments with the two PLC-inhibitors U73122 and neomycin were performed.  $I_{\text{sc}}$ -experiments revealed that U73122 could cancel  $\Delta I_{\text{sc}(\text{Cd})}$  whereas neomycin could only cancel  $\Delta I_{\text{sc}(\text{Cd})}$  at lower doses of  $\text{Cd}^{2+}$ . Contrary to the  $I_{\text{sc}}$ -experiments, U73122 could only abolish  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  at 100  $\mu\text{M}$   $\text{Cd}^{2+}$  whereas at 400  $\mu\text{M}$   $\text{Cd}^{2+}$  the cancellation, though significant, was partial (VII). This paradox is difficult to explain, but it may be due to different experimental setups as  $I_{\text{sc}}$ -experiments were measured on confluent cells and the fura-2-experiments were measured on cell suspensions. To address this topic further studies are necessary. Nevertheless, at 100  $\mu\text{M}$   $\text{Cd}^{2+}$  the fura-data are in accordance with the  $I_{\text{sc}}$ -experiment, which supports that  $\text{Cd}^{2+}$ -transients are a result of receptor-interactions that relies on PLC-activation. Besides being used as PLC-inhibitor, neomycin is also a well-known CaR-agonist (Hammerland *et al.*, 1999; Spurney *et al.*, 1999; Ye *et al.*, 1996). However, the fact that neomycin only inhibits  $\Delta I_{\text{sc}(\text{Cd})}$  at lower doses suggests that neomycin may function as a CaR-modulator rather than a PLC-inhibitor in A6 cells. This is in accordance with the idea that  $\text{Cd}^{2+}$  at a high dose probably displaces neomycin from the CaR as would be postulated if  $\text{Cd}^{2+}$  too functions as a CaR-agonist in A6-cells. In addition, the fact that  $\text{Cd}^{2+}$  selectively causes  $I_{\text{sc}}$  to increase at the basolateral surface suggests that the mechanism for triggering  $\Delta I_{\text{sc}(\text{Cd})}$  and  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  is due to extracellular events. Otherwise membrane penetration of  $\text{Cd}^{2+}$ , e.g. by diffusion, would cause similar responses at both cell surfaces. Therefore, if  $\text{Cd}^{2+}$  serves as an agonist of CaR, the receptor would necessarily have to be located at the basolateral surface. In fact, in the distal segment of rat kidney cells CaR was exclusively located at the basolateral surface (Riccardi *et al.*, 1998).

The CaR is unique in the sense that the physiological ligand is an inorganic ion, rather than an organic molecule. Activation of the receptor by increased levels of extracellular  $\text{Ca}^{2+}$  results in the breakdown of phosphoinositide 4,5-diphosphate by PLC and the formation of  $\text{IP}_3$  and diacylglycerol. The resultant increase in levels of  $\text{IP}_3$  mobilizes intracellular  $\text{Ca}^{2+}$  from the endoplasmic reticulum (ER). CaR presumably recognizes other divalent cations than  $\text{Ca}^{2+}$  and even polycations such as neomycin as mentioned (Brown, 1991) above. Previously studies have shown that  $\text{Cd}^{2+}$  and other divalent metals mobilized cell  $\text{Ca}^{2+}$  in human skin (Smith, 1989), in

E367 neuroblastoma cells (Benters, 1997) and bovine chromaffin cells (Yamagami *et al.*, 1998) via an increased generation of  $IP_3$ . Furthermore, the divalent metals appeared to trigger  $Ca^{2+}$ -mobilization via a reversible interaction with an external site on the cell surface, which the authors referred to as a “ $Cd^{2+}$ -receptor”. Thus, PLC-inhibitor experiments point in the direction that PLC plays an important role for triggering  $\Delta I_{sc(Cd)}$  and  $[\Delta Ca^{2+}]_{Cd}$ . Thus, the possible involvement of CaR was examined by measuring its second messenger,  $IP_3$ , directly. When A6 cell suspensions were exposed for 60 sec with 400  $\mu M$   $Cd^{2+}$  the concentration of intracellular  $IP_3$  underwent a 1.45-fold increase proportional to the resting level, which is very similar to ratios reported in the studies listed above. In addition, preexposure to the U73122 completely abolished  $IP_3$ -generation stimulated by  $Cd^{2+}$  suggesting that U73122 likely inhibits PLC. Therefore, it seems very likely that  $Cd^{2+}$  causes  $Ca^{2+}$ -transients via the  $IP_3$  signalling pathways. Taken together, direct measurements of  $IP_3$ -generation and the  $Cd^{2+}$ -TG-interactions described above, suggest that  $\Delta I_{sc(Cd)}$  and  $[\Delta Ca^{2+}]_{Cd}$  involves  $IP_3$ -generation. This might go through the activation of CaR as it is likely that CaR is present in the basolateral membrane of A6 cells since the natural agonist,  $Ca^{2+}$ , also stimulated  $IP_3$ -generation, which significantly exceeded the control level.

Several studies have demonstrated that metals with similar chemical characteristics as  $Cd^{2+}$  are protective against biochemical and toxic effects of  $Cd^{2+}$  in a competitive manner (Benters, 1997; Blazka & Shaikh, 1992; Endo, 1996; Smith, 1994; Tang *et al.*, 1998). Both  $Zn^{2+}$  and  $Ni^{2+}$  induced  $Cl^-$ -secretion with  $Zn^{2+}$  being most potent. Preexposure to  $Zn^{2+}$  or  $Ni^{2+}$  prevented  $[\Delta Cl^-]_{Cd}$ , which was comparable with the inhibiting actions of the fenemates. This observation demonstrates that  $Ni^{2+}$  and  $Zn^{2+}$  abolish  $[\Delta Cl^-]_{Cd}$  completely probably due to similar mechanisms in A6 cells. Since  $Cd^{2+}$ -induced  $Cl^-$  secretion and  $Ca^{2+}$  mobilization probably are closely connected, the relationship between  $Zn^{2+}/Ni^{2+}$  and  $Ca^{2+}$ -mobilizations was examined. Both metals induced  $Ca^{2+}$ -mobilization in a  $Cd^{2+}$ -like fashion, i.e. they too displayed transient characteristics with very fast kinetics that resembled those obtained in  $I_{sc}$ -experiments. In fact, both metals were more potent inducers of  $Ca^{2+}_i$  displaying significant higher peak levels than  $Cd^{2+}$ . In contrast, only  $Cd^{2+}$  induced an increase in  $Ca^{2+}_i$  in E367 neuroblastoma cells whereas  $Zn^{2+}$  caused no change in  $Ca^{2+}_i$  (Benters, 1997). Pretreatment with either  $Zn^{2+}$  or  $Ni^{2+}$  prevented  $[\Delta Ca^{2+}]_{Cd}$  normally observed with  $Zn^{2+}$  being the most potent cancelling metal. These data confirm and extend the previous findings in the sense that the similar metals  $Cd^{2+}$ ,  $Zn^{2+}$  and  $Ni^{2+}$  shares similar mechanisms regarding the ability to evoke  $Ca^{2+}$  transients and resulting  $Cl^-$ -secretion in A6 cells. Could this also be due to the activation of the CaR as observed for  $Cd^{2+}$ ? In human skin fibroblasts (Smith, 1989), bovine chromaffin cells (Yamagami *et al.*, 1998) and HEK 293-cells (Spurney *et al.*, 1999) divalent metals, other than  $Cd^{2+}$ , displayed  $Ca^{2+}$  mobilizing abilities that depended on  $IP_3$ -generation. Accordingly,  $Zn^{2+}$  and  $Ni^{2+}$  at 400  $\mu M$ , like  $Cd^{2+}$ , could induce  $IP_3$ -generation significantly above control level and in accordance with their ability to induce  $Ca^{2+}_i$ -transients. Thus, it is likely that  $Zn^{2+}$  and  $Ni^{2+}$  share common mechanisms with  $Cd^{2+}$ , as the effects on  $I_{sc}$ ,  $Ca^{2+}_i$  and  $IP_3$ -generation were very similar, and as  $Zn^{2+}$  and  $Ni^{2+}$  could completely abolish  $Cd^{2+}$ -mediated effects. In fact,  $Zn^{2+}$  and  $Ni^{2+}$  have previously been proposed as CaR-agonists (Dwyer *et al.*, 1991; Shankar, Huang, Adebajo, Simon, Alam, Moonga, Pazianas, Scott, & Zaidi, 1995), which therefore can account for the observed effects in A6 cells. Moreover,  $Mn^{2+}$  was used as a fura-2-quencher, however, when applied at high doses (10 mM)  $Ca^{2+}_i$ -peaks like those observed for the heavy metals were observed. Hence, the CaR potentially present in A6 cells presumably recognizes other cations than  $Ca^{2+}$ , and is apparently activated by a broad range of divalent metals including  $Ni^{2+}$ , leading to hormone-like  $Ca^{2+}$ -transients. Results presented in manuscript VIII indicate that  $Ni^{2+}$  probably is a “cleaner” agonist than  $Cd^{2+}$  as side-effects such

as capacitative calcium/cadmium entry (stimulation of  $\text{Ca}^{2+}$  channels when emptying intracellular  $\text{Ca}^{2+}$  stores) is not observed when  $\text{Ni}^{2+}$  is applied to A6 cells.

Activation of the CaR leads to a variety of biological activities caused by the subsequent activation of PKC and increased  $\text{Ca}^{2+}_i$ . However, one consequence of CaR-activation is inactivation of cAMP-dependent responses. Therefore, a physiological response upon CaR-activation is reduced water reabsorption due to reduction in cAMP levels, which serves as a second messenger for the antidiuretic hormone (see chap. 3.6). Thus, if  $\text{Cd}^{2+}$  serves as a CaR agonist one would expect  $\text{Cd}^{2+}$ , besides the effects described above on  $\text{Ca}^{2+}_i$  and  $\text{IP}_3$ -generation, to diminish the AVT-response. In fact,  $\text{Cd}^{2+}$  inhibited the AVT-induced increase in  $I_{sc}$ , which could not be caused by inhibition of the  $\text{Na}^+-\text{K}^+-\text{ATPase}$  as  $\text{Cd}^{2+}$  did not inhibit the transporter. Furthermore, the results showed that PDE-activity was unaffected, whereas cAMP production was reduced due to inhibition of AC-activity, which is a typical response upon CaR-activation.

Overall, from a physiological and pathophysiological point of view basolateral exposure of cadmium at the distal nephron is of interest due to: 1) equal proximal/distal "load" of cadmium as mentioned earlier. 2) The present results show that cadmium causes side-specific effects both in  $I_{sc}$ - and cytotoxic experiments, which are far more pronounced when cadmium is administered to the basolateral surface (Faurskov & Bjerregaard, 1997). 3) Traditionally, the proximal tubule is regarded as the main site of cadmium-mediated nephrotoxicity. Effects at this site are probably quantitatively most important. However, the distal nephron and the collecting duct are the main sites for hormonal regulation of ions (exclusively for  $\text{Ca}^{2+}$ -transport) and water transport. 4) One can argue that the doses used are unphysiologically high as  $H_{0.5}$  was approximately 400  $\mu\text{M}$ . Dose-response experiments have, however, revealed responses at doses as low as 1  $\mu\text{M}$   $\text{Cd}^{2+}$ , and that cadmium at 1  $\mu\text{M}$  also could inhibit AVT-stimulated  $I_{sc}$  (Bjerregaard & Faurskov, 1997). Reported cadmium-blood levels for exposed workers lie generally between 5 and 50  $\mu\text{g/l}$  (corresponding to 44 and 444 nM  $\text{Cd}^{2+}$ ), but after extremely high exposures, blood levels as high as 300  $\mu\text{g/l}$  (2.7  $\mu\text{M}$ ) were reported (see chap. 3.3). In blood, cadmium is bound to metallothionein and small ligands such as cysteine, glutathione, mercaptoethanol or albumin (Foulkes, 1990). A potential cellular target for cadmium could be the CaR since it contains highly conserved extracellular cysteine residues, which is believed to be involved in selective binding of divalent cations (Ray *et al.*, 1999; Ward *et al.*, 1998). Thus, the effects of cadmium are a results of the balance between affinities of cadmium bound to blood and membrane ligands. Accordingly,  $\text{Cd}^{2+}$  induced  $\text{Ca}^{2+}_i$ -transients in  $\mu\text{M}$ -range, which is far below the physiological range of the CaR-agonist,  $\text{Ca}^{2+}_o$ , which works in mM-range indicating that  $\text{Cd}^{2+}$ -affinity towards the CaR is very high.

Hence, effects were observed under acute conditions that are not far from physiological blood concentrations of cadmium. The major effect of cadmium might, however, be when the distal part is exposed chronically and by that disturbing the Ca-homeostasis, hormonal regulation of water and electrolytes. This could lead to calcuria, osteoporosis and in severe cases to kidney-stone formation, which are well-known diseases accompanied chronic environmental exposure of cadmium (Järup *et al.*, 1998; Savolainen, 1995; Staessen *et al.*, 1991) and observed in patients suffering from an inherited human disorder of  $\text{Ca}^{2+}$  homeostasis caused by CaR-overactivity (Brown, 1999; Pollak *et al.*, 1994).

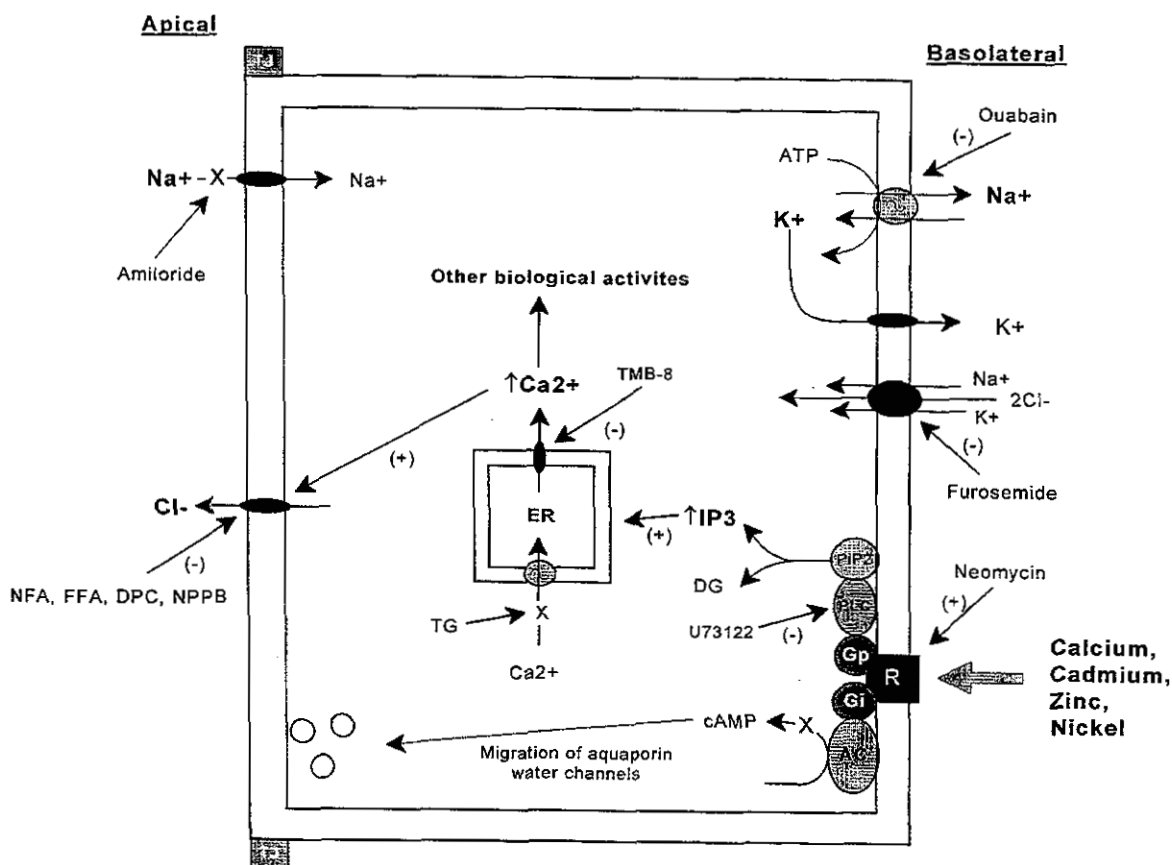


## 7. CONCLUSION

Convincingly, the model for CaR-activation proposed by Hebert & Brown (Hebert & Brown, 1995) (figure 3.3) fits almost entirely with the results obtained in this thesis, which support the hypothesis that the CaR recognizes  $\text{Cd}^{2+}$ , and probably also  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$ , as agonists leading to biological activities in A6 cells summarized below (see also figure 7.1).

The results indicate that an extracellular cation-sensing receptors may be present in the basolateral membrane of A6 cells, which is activated by extracellular  $\text{Cd}^{2+}$ . In previous reports, this receptor has been referred to as a “ $\text{Cd}^{2+}$ -receptor”. It is, however, possible that the newly discovered calcium sensing receptor, CaR, is responsible for the observed effects, which is supported by the fact that CaR recognizes many other cations than  $\text{Ca}^{2+}$ , e.g.  $\text{Mg}^{2+}$ ,  $\text{Gd}^{3+}$  (for reviews see (Chattopadhyay *et al.*, 1998; Hebert & Brown, 1995). Also, neomycin, which is often regarded as a CaR-agonist, extensively affected both  $\Delta I_{\text{sc(Cd)}}$  and  $[\Delta \text{Ca}^{2+}]_{\text{Cd}}$ . Additionally, the mechanism by which  $\text{Cd}^{2+}$  affects the  $\text{Ca}^{2+}$  homeostasis is hormone-like due to the prompt and transient nature of  $[\Delta \text{Ca}^{2+}]_{\text{Cd}}$  and not caused by inhibition of  $\text{Ca}^{2+}$ -ATPases, which would elicit a sustained  $\text{Ca}^{2+}$ -level. Furthermore, the  $I_{\text{sc}}$ -results suggest a polarized localization of the possible CaR, because  $\text{Cd}^{2+}$ -evoked  $I_{\text{sc}}$ -transient was observed only when  $\text{Cd}^{2+}$  was added to the basolateral surface of A6-cells. Moreover, an early event upon activation of CaR is the generation of  $\text{IP}_3$  via PLC. All the tested cations provoked  $\text{IP}_3$ -generation that exceeded the control level. The PLC inhibitor, U73122, altered  $[\Delta \text{Ca}^{2+}]_{\text{Cd}}$  and was able completely to cancel the  $\text{Cd}^{2+}$ -mediated  $\text{IP}_3$ -generation. Additional experiments with TG support the idea that  $\text{Cd}^{2+}$  (and  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$ ) provokes  $\text{Ca}^{2+}$  transients via  $\text{IP}_3$ -generation originating from ER, because TG-pretreatment significantly lowered  $\text{Cd}^{2+}$ -induced  $\text{Ca}^{2+}$ -mobilization. TMB-8 exhibited an even more pronounced cancelling effect on  $\text{Cd}^{2+}$ -evoked  $\text{Ca}^{2+}$ -transients, however, due to nonspecific effects, the origin of the TMB-8-related effects is difficult to pinpoint (VII). Finally, pretreatment with  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$  completely abolished  $[\Delta \text{Ca}^{2+}]_{\text{Cd}}$  suggesting that they too probably rely on the same mechanisms as  $\text{Cd}^{2+}$  in A6 cells.

Thus, it can be concluded that the obtained results confirm our previous observations that  $\text{Cd}^{2+}$  and possible also  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$  mobilize intracellular  $\text{Ca}^{2+}$ , probably through the activation of an external receptor, which most likely is the CaR, leading to PLC-mediated  $\text{IP}_3$ -generation that stimulates TG-sensitive ER to release  $\text{Ca}^{2+}$  from its stores. Interestingly, the kinetics and dose-response characteristics of  $[\Delta \text{Ca}^{2+}]_{\text{Cd}}$  correspond with those previously observed under similar conditions in  $I_{\text{sc}}$ -experiments. Moreover, these  $I_{\text{sc}}$ -experiments showed that the  $\text{Cd}^{2+}$ -transient consisted of  $\text{Cl}^-$ -secretion entirely. Accordingly, the same kinetics and dose-response between  $I_{\text{sc}}$ -experiments and fura-2-experiments strongly suggest that  $\text{Cd}^{2+}$ -evoked  $\text{Cl}^-$ -secretion and  $\text{Ca}^{2+}$ -mobilization are closely connected. However, the fact that TG is unable to provoke further increases in  $I_{\text{sc}}$  in A6 cells during  $\text{Cd}^{2+}$  exposure, but able to increase  $\text{Ca}^{2+}$  further after pretreatment with  $\text{Cd}^{2+}$  suggests that  $\text{Cd}^{2+}$ -mediated  $\text{Cl}^-$ -channels responsible for  $\text{Cl}^-$ -secretion become desensitized. The transient increase of  $\text{Ca}^{2+}$  is therefore likely to activate  $\text{Ca}^{2+}$ -sensitive  $\text{Cl}^-$ -channels in the apical membrane of A6 cells leading to transcellular  $\text{Cl}^-$ -secretion. Similar results have been obtained in RaKCaR cRNA-injected *Xenopus* oocytes, which responded to extracellular  $\text{Ca}^{2+}$ ,  $\text{Mg}^{2+}$ ,  $\text{Gd}^{3+}$  and neomycin with a characteristic activation of  $\text{IP}_3$ -dependent, intracellular  $\text{Ca}^{2+}$ -induced  $\text{Cl}^-$ -secretion (Riccardi, 1995). Furthermore, extracellular cadmium and calcium both interferes with the hormonal regulation of electrolytes in the distal nephron since it has been shown that  $\text{Ca}^{2+}$  decrease ADH-induced chloride transport by inhibiting cAMP pathway in rat kidney (De Jesus Ferreira & Bailly, 1998) in same way that  $\text{Cd}^{2+}$  did in A6 cells (Bjerregaard & Faurskov, 1997).



**Figure 7.1.** A model illustrating the manner in which cadmium, zinc and nickel act as extracellular messengers for the calcium-sensitive receptor (CaR). Activation of the CaR, by binding to negatively charged regions, activates phospholipase C (PLC) leading to increased levels of intracellular diacylglycerol (DG) and inositol 1,4,5-triphosphate ( $\text{IP}_3$ ), and concomitant release of  $\text{Ca}^{2+}$  from internal stores. Activation of the CaR also reduces cAMP-levels by inhibition of adenylate cyclase (AC)-activity. The  $\text{Cd}^{2+}$ -induced changes in the activities of second messenger systems alter the biological activities of the cell, e.g. activation of apical  $\text{Cl}^-$  channels leading to transmembrane  $\text{Cl}^-$  secretion, reduced AVT-response leading to diminished water and electrolyte uptake. Long-term effect could be destabilisation of tight-junctions leading to reduced  $R_{te}$  disturbances of water and electrolyte balance (especially  $\text{Ca}^{2+}$  in the distal nephron) and eventually cell death through induction of apoptosis. (-) and (+) indicate inhibitory or stimulative action of the particular test agent.

In figure 7.1, proposed mechanisms behind  $\text{Cd}^{2+}$ -mediated effects in A6 cells are summarized. In summary, the results indicate that an extracellular cation-sensing receptor may be present in the basolateral membrane of A6 cells, which is activated by extracellular  $\text{Cd}^{2+}$  and possible also  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$ . Activation of the CaR leads to increased formation of  $\text{IP}_3$  and subsequently release of  $\text{Ca}^{2+}$  from ER. Moreover, CaR-activation suppress cAMP pathway, which reduces the overall ADH-response.  $\Delta[\text{Ca}^{2+}]_{\text{cd}}$  then activates  $\text{Ca}^{2+}$ -sensitive  $\text{Cl}^-$ -channels in the apical membrane of A6 cells leading to transcellular  $\text{Cl}^-$ -secretion. Long-term effects caused by excessive  $\text{Cd}^{2+}$  concentrations leads to destabilisation of tight junctions and by that lowering  $R_{te}$  as observed in  $\text{IC}_{50}$ -measurements. Later,  $\text{Cd}^{2+}$ -mediated  $\text{Ca}^{2+}$ -disturbances may lead to cell death by induction

of apoptosis, as  $\text{Ca}^{2+}$  plays an important role in the transduction of apoptogenic signals (see section 3.6). However, the importance of cadmium-mediated disturbances of distal nephron functions at subtoxic doses may be underestimated because of overwhelming proximal tubule damage and that disturbances of calcium homeostasis and water/electrolyte balance in the distal tubule cause nonspecific symptoms, the origin of which is difficult to decide. Overall, it is suggested that distal tubule nephrotoxicity may be a part of overall renal cadmium toxicity leading to clinical symptoms related to disturbances of calcium homeostasis in the distal nephron.

## 8. PERSPECTIVES

It is suggested that cadmium (and zinc and nickel) acts as a CaR-agonists in A6-cells leading to intracellular  $\text{Ca}^{2+}$  mobilization and subsequently activation of apical chloride channels and AVT-response. However, this hypothesis calls for supplementing studies as proposed below;

1. In the present study inorganic cadmium was used, however, using inorganic cadmium does not reflect the *in vivo* conditions as cadmium has high affinity towards proteins such as MT, albumin, sulfhydryl groups etc. and therefore mainly exists as stable ligand-cadmium complexes in blood. The optimal experimental *in vitro* condition would be to perform the experiments in the presence of serum or albumin and/or the use of Cd-MT. However, like in most other *in vitro* studies, experiments were performed under serum-free conditions to avoid the presence of unknown substances that could lead to uncontrollable conditions and subsequently misinterpretations of obtained results. Nevertheless, supplementary *in vitro* experiments using serum, albumin or Cd-MT are necessary to perform in future.
2. This study has focussed on short-term effects, but exploring long-term effects would perhaps tell more about cadmium as a distal nephron toxicant as damage to this nephron segment can be difficult to detect in short-term. Moreover, long-term effects should be supplemented with *in vivo* studies, e.g. determination of urinary  $\text{Ca}^{2+}$  and kallikrein excretion, to explore the physiological relevance of cadmium as a distal nephron toxicant.
3. The studies indicate that  $\text{Cd}^{2+}$  hardly transverse the membrane of A6 cells - at least within 60 minutes of exposure. However, direct evidence for cadmium transport could be elucidated using the  $\text{Cd}^{2+}$ -specific probe, BTC-5N, which is more sensitive and selective to  $\text{Cd}^{2+}$  than the used APTRA-BTC/AM. This would also bring in a more direct evidence of no  $\text{Cd}^{2+}$ -fura-2-interaction that presently is based upon indirect evidence although it seems massive.
4. The results imply that the CaR is present in the basolateral membranes of A6 cells, however, direct evidence is necessary to be certain. This could for instance be accomplished by using the PCR-technique. Moreover, CaR-transfection of *Xenopus laevis* eggs could lead to functional studies of the substrate specificity of the CaR derived from A6 cells and actually prove if  $\text{Cd}^{2+}$  activated the CaR.
5. The blocker experiments in SPQ-studies, using FFA and NFA, ought to be supplemented using blockers, which do not affect  $\Delta I_{\text{sc}(\text{Cd})}$ , e.g. DIDS, to ensure that the observed blocking effects are specific.
6. The specificity of the PLC-inhibitor, U73122, compared to its inactive counterpart, U73343, should have been rigorously tested. However, all the performed experiments suggest that U73122 indeed inhibits PLC.
7. The studies also show that there might be a connection between  $\text{Cd}^{2+}$ -mediated lowering of  $R_{\text{te}}$  and increased levels of  $\text{Ca}^{2+}_{\text{i}}$ . However, this subject needs to be elucidated further. Also, whether long-term exposure of  $\text{Cd}^{2+}$  causes destruction of tight-junctions and/or apoptosis that both are mediated in part by  $\text{Ca}^{2+}_{\text{i}}$ -changes. Long-term measurements of  $\text{Cd}^{2+}$ -evoked  $\text{Ca}^{2+}$  increases using fura-2 could answer some of these questions.

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## **APPENDIXES**



## **ARTICLE/MANUSCRIPT I**



## Effect of Cadmium on Active Ion Transport and Cytotoxicity in Cultured Renal Epithelial Cells (A6)

B. FAURSKOV\* and H. F. BJERREGAARD

Department of Life Sciences and Chemistry, Roskilde University, PO Box 260, 4000 Roskilde, Denmark

**Abstract**—A cultured epithelial cell line from toad kidney (A6) was used to study the mechanism by which cadmium (Cd) affects transepithelial resistance (TER) and active transepithelial ion transport measured as short-circuit current (SCC) *in vitro*. The influence of Cd on cell integrity was investigated by measuring time-dependent TER under controlled conditions and the half-maximal inhibition concentration ( $IC_{50}$ ) 24 hr after exposure to 1 mM CdCl<sub>2</sub>. The data suggest that Cd deterioration of cell integrity is stronger when applied to the apical relative to the basolateral solution ( $IC_{50}$  = 173.9 and 147.8  $\mu$ M, respectively). Also, the data demonstrate that addition of Cd to the basolateral solution results in a prompt and transient stimulation of the active ion transport from  $2.6 \pm 0.4$  to  $8.7 \pm 1.1$   $\mu$ A/cm<sup>2</sup>. Use of the sodium channel blocker amiloride indicate that Na transport is not involved in Cd-stimulated SCC. Substitution of Cl with SO<sub>4</sub><sup>2-</sup> in the basolateral solution and use of the Cl channel inhibitors, diphenylamine-2-carboxylase (DPC) and niflumic acid indicate strongly that Cd increases Cl secretion in A6 epithelium. Thapsigargin (TG), an intracellular Ca-ATPase blocker, inhibits Cd-stimulated active ion transport indicating that Ca-activated Cl channels are probably involved. Therefore, we suggest that Cd by interaction with the basolateral membrane, become internalized and increase Ca intracellularly. In a dose- and time-dependent way an increase in Ca activates specific Cl channels leading to an increased SCC. Thereafter, the increase in Ca leads to disruption of tight junctions thereby decreasing TER. This may lead to deterioration of cell integrity and perhaps even cell death. © 1997 Published by Elsevier Science Ltd

**Abbreviations:** DPC = diphenylamine-2-carboxylase; Fur = furosemide;  $IC_{50}$  = half maximal inhibition concentration; SCC = short-circuit current; TER = transepithelial resistance; TG = thapsigargin.

**Keywords:** cadmium; active sodium-chloride transport; transepithelial resistance; renal epithelial cells (A6); cell integrity; *in vitro* toxicity.

## **ARTICLE/MANUSCRIPT II**

## Cadmium-induced Inhibition of ADH-stimulated Ion Transport in Cultured Kidney-derived Epithelial Cells (A6)

Henning F. Bjerregaard and Brian Faurskov

*Department of Life Sciences and Chemistry, Roskilde University, P.O. Box 260, 4000 Roskilde, Denmark*

**Summary** — An epithelial cell line (A6) derived from the distal tubule of toad kidney, was used to study the effect of cadmium ( $\text{Cd}^{2+}$ ) on the increase in active ion transport induced by anti-diuretic hormone (ADH). Addition of  $\text{Cd}^{2+}$  (1mM) to the basolateral solution of A6 epithelia generated an immediate and transient increase in active ion transport, measured as short circuit current (SCC). This increase was not affected by prior addition of ADH. However, there was a distinct inhibition of ADH-induced stimulation of SCC in epithelia pre-treated with  $\text{Cd}^{2+}$ . Since cAMP serves as an intracellular messenger for ADH by increasing the ion permeability of the apical membrane in A6 epithelial cells, the effects of  $\text{Cd}^{2+}$  on enzymes involved in cAMP metabolism were measured. The results showed that  $\text{Cd}^{2+}$  markedly inhibits cAMP production by inhibiting adenylate cyclase (which had been stimulated with forskolin, magnesium or a non-hydrolysed GTP-analog), indicating that  $\text{Cd}^{2+}$  inhibits the catalytic subunit of adenylate cyclase. Furthermore, degradation of cAMP by phosphodiesterase was not stimulated by  $\text{Cd}^{2+}$ , also suggesting that the mechanism by which  $\text{Cd}^{2+}$  inhibits the ADH-induced ion transport could be through inhibition of adenylate cyclase. Taken together, these results indicate that, in addition to the well-known toxic effect on the proximal tubule,  $\text{Cd}^{2+}$  could also have an effect on the distal part of the kidney, where the important hormonal regulation of salt and water homeostasis takes place.

**Key words:** cadmium, active ion transport, ADH, adenylate cyclase, phosphodiesterase, distal renal epithelial cell culture (A6).

## **ARTICLE/MANUSCRIPT III**



PERGAMON

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## Effect of Cisplatin on Transepithelial Resistance and Ion Transport in the A6 Renal Epithelial Cell Line

B. FAURSKOV\* and H. F. BJERREGAARD

Department of Life Sciences and Chemistry, Roskilde University, Universitetsvej 1, 4000 Roskilde, Denmark

**Abstract**—Cisplatin is a platinum-containing antitumour agent, the usefulness of which is limited by nephrotoxicity. In the present study, we examined the effects of cisplatin on the established renal epithelial A6 cell line, which forms a polarized monolayer *in vitro* with active transmembrane ion transport. The effect of cisplatin (0–800  $\mu\text{M}$ ) on transepithelial ion transport and transepithelial resistance (TER) was monitored by the short-circuit current (SSC) technique. Cell integrity was determined by monitoring TER at increasing concentration of cisplatin during 24 hours. The half-maximal inhibition concentration was 49 and 540  $\mu\text{M}$  when applied to either the basolateral or apical surface, respectively. This suggests that cisplatin-mediated deterioration of cell integrity is far more pronounced when cisplatin is applied basolaterally than apically. Continuous measurements of TER demonstrated a dose- and time-dependent decline in  $\text{TER}/\text{TER}_0$  (TER at time zero). In addition, cisplatin from the basolateral side had no prompt effect on transepithelial ion transport. Instead a slow, but dose-dependent decline which at the highest concentration resembled the decline observed when ouabain was added. Inhibition of Na-K-ATPase by cisplatin was examined by the use of nystatin, a membrane permeabilizer, and data suggest that cisplatin at 800  $\mu\text{M}$  inhibits Na-K-ATPase by about 50% after 60 minutes of exposure. Morphological examinations of subcultured cisplatin treated cells indicate that cell death is probably due to apoptosis rather than necrosis. © 1999 Elsevier Science Ltd. All rights reserved

**Keywords:** cisplatin; short-circuit current; transepithelial resistance; renal epithelial cells (A6); nystatin; Na-K-ATPase.

**Abbreviations:** AVT = arginine vasotocin; DMEM = Dulbecco's modified Eagle's medium; SSC = short-circuit current; TER = transepithelial resistance.

## **ARTICLE/MANUSCRIPT IV**

## Chloride Secretion in Kidney Distal Epithelial Cells (A6) Evoked by Cadmium

B. Faurskov<sup>\*.1</sup> and H. F. Bjerregaard<sup>†</sup>

<sup>\*</sup>Grenaa Central Hospital, Sygehusvej 6, 8500 Grenaa, Denmark; and <sup>†</sup>Department of Life Sciences and Chemistry, Roskilde University, P.O. Box 260, DK-4000 Roskilde, Denmark

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Chloride Secretion in Kidney Distal Epithelial Cells (A6)  
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The effect of  $\text{Cd}^{2+}$  on chloride secretion was examined in A6 renal epithelia cells by chloride-sensitive fluorescence (SPQ probe) and by the short-circuit-current ( $I_{sc}$ ) technique. Depleting the cells of  $\text{Cl}^-$  suggests that the  $\text{Cd}^{2+}$ -activated  $I_{sc}$  ( $\Delta I_{sc(\text{Cd})}$ ) is dependent on the presence of  $\text{Cl}^-$  ions. Among the  $\text{Cl}^-$ -channel inhibitors the fenemates, flufenamic acid (FFA) and niflumic acid (NFA), and 5-nitro-2-(3-phenylpropylamino)-benzoate (NPPB) significantly lowered  $\Delta I_{sc(\text{Cd})}$  compared with control level. In SPQ-loaded A6 cells,  $\text{Cd}^{2+}$  evoked an increase in  $\text{Cl}^-$  secretion ( $[\Delta \text{Cl}^-]_{\text{Cd}}$ ), which significantly exceeded the basal  $\text{Cl}^-$  transport and was blockable by FFA and NFA. The closely related metals,  $\text{Zn}^{2+}$  or  $\text{Ni}^{2+}$ , were also able to activate  $\text{Cl}^-$  secretion. Preexposure of  $\text{Zn}^{2+}$  or  $\text{Ni}^{2+}$  completely prevented  $[\Delta \text{Cl}^-]_{\text{Cd}}$ , suggesting that  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$  probably use similar mechanisms. Like  $\text{Cd}^{2+}$ , thapsigargin (TG), an inhibitor of intracellular  $\text{Ca}^{2+}$ -ATPase and the  $\text{Ca}^{2+}$ -ionophore A23187, induced an increase in  $I_{sc}$ . Moreover, TG and  $\text{Cd}^{2+}$  were able to neutralize the responses of the counterparts as also observed in  $I_{sc}$  measurements, which indicates that  $\text{Cd}^{2+}$  activates  $\text{Cl}^-$  secretion in a  $\text{Ca}^{2+}$ -dependent manner. Hence, this study supports the idea that basolateral  $\text{Cd}^{2+}$  (possibly also  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$ ), probably through a  $\text{Ca}^{2+}$ -sensing receptor, causes calcium mobilization that activates apical fenemate-sensitive chloride channels leading to chloride secretion in A6 cells. © 2000 Academic Press

**Key Words:** cadmium; calcium; chloride-channel blockers; chloride secretion; fluorescence; heavy metals; renal epithelial cells (A6); short-circuit-current; 6-methoxy-N-(sulfoethyl)quinolinium (SPQ).



## **ARTICLE/MANUSCRIPT V**

**Cadmium mobilizes intracellular calcium in a hormone-like manner  
in renal distal epithelial A6 cells**

B. Faurskov\* & H. F. Bjerregaard<sup>‡</sup>

\*Corresponding author: Grenaa Central Hospital, Klinisk Biokemisk Område, Sygehusvej 6, 8500 Grenaa, Denmark. Phone: +45 89585871, Fax: +45 89585677. E-mail: bf@get2net.dk

<sup>‡</sup>Department of Life Sciences and Chemistry, Roskilde University, PO Box 260, 4000 Roskilde, Denmark

Running headline: Cd<sup>2+</sup>-evoked Ca<sup>2+</sup>-mobilization in A6 cells

Number of figures: 10

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## ABSTRACT

The effect of  $\text{Cd}^{2+}$  on intracellular  $\text{Ca}^{2+}$  homeostasis was examined in renal epithelial A6 cells loaded with fura-2.  $\text{Cd}^{2+}$  produced a large transient hormone-like spike in cytosolic  $\text{Ca}^{2+}$  in a dose-dependent manner. Recently, a calcium-sensing receptor (CaR) has been identified in the kidney that may transduce the biological effects of  $\text{Cd}^{2+}$ . Activation of the receptor by increased levels of extracellular  $\text{Ca}^{2+}$  results in the breakdown of phosphoinositide 4,5-diphosphate by phospholipase C (PLC) and the formation of 1,4,5-inositol-triphosphate ( $\text{IP}_3$ ) and diacylglycerol. The resultant increase of the  $\text{IP}_3$ -levels mobilizes intracellular  $\text{Ca}^{2+}$  from endoplasmic reticulum (ER). CaR presumably recognizes other cations than  $\text{Ca}^{2+}$ , e.g.  $\text{Mg}^{2+}$  and  $\text{Gd}^{3+}$ , and even polycations such as neomycin. The PLC-inhibitor U73122 and the CaR-agonist, neomycin, both affected  $\text{Cd}^{2+}$ -evoked increase in intracellular  $\text{Ca}^{2+}$  ( $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$ ) suggesting the involvement of CaR in  $\text{Cd}^{2+}$ -mediated cell signalling. Further, thapsigargin, an inhibitor of intracellular  $\text{Ca}^{2+}$ -ATPases that deplete intracellular  $\text{Ca}^{2+}$ -stores, significantly reduced  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$ . Extending these observations,  $\text{IP}_3$ -binding studies showed that the concentration of intracellular  $\text{IP}_3$  underwent a 1.45-fold increase proportional to the resting level when exposed to  $\text{Cd}^{2+}$ . Finally, we found that the  $\text{Cd}^{2+}$ -related heavy metals,  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$ , were even more potent inducers of  $\text{Ca}^{2+}$ -mobilization than  $\text{Cd}^{2+}$ .  $\text{Zn}^{2+}$  was also able to significantly increase the  $\text{IP}_3$ -generation above control level. Moreover, both  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$  completely abolished the transient increase in  $\text{Ca}^{2+}_i$  evoked by  $\text{Cd}^{2+}$ . It can be concluded that  $\text{Cd}^{2+}$ , and possibly  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$ , may act as a CaR-agonist leading to  $\text{IP}_3$ -mediated release of  $\text{Ca}^{2+}$  from intracellular stores.

*Keywords: heavy metals, calcium-sensitive receptor, fura-2, fluorescence, short-circuit-current.*

## Introduction

The kidney is believed to be the most critical organ for cadmium toxicity. Often mechanisms and effects of inorganic cadmium ( $\text{Cd}^{2+}$ ) is focussed on epithelial cells originating from the renal proximal tubule since this nephron segment reabsorbs the bulk of ultrafiltered  $\text{Cd}^{2+}$  (for reviews see 26, 33). However, evidence for distal tubule toxicity suggests that cadmium may also act at this nephron site (27).

To elucidate the effect of Cadmium on epithelial cells from the distal part of the kidney we used A6 cells. A6 cells, originating from *Xenopus laevis* (African clawed toad) was used since this cell model exhibits morphological and functional properties of the mammalian distal epithelium (47). A6 cells respond to various hormones and intracellular second messengers and exhibit  $\text{Na}^+$  and  $\text{Cl}^-$ -transport similar to what is observed *in vivo* (47, 48, 54, 67). In previous studies we found that  $\text{Cd}^{2+}$  administered to the basolateral surface of renal epithelia A6 cells, induced a prompt and transient increase in short-circuit-current ( $\Delta I_{\text{sc}(\text{Cd})}$ ), which was independent of  $\text{Na}^+$  transport (23), but exclusively involved  $\text{Cl}^-$ -secretion (25). Moreover,  $\text{Ca}^{2+}$ -mobilization was apparently crucial for these events.

Cellular calcium homeostasis and calcium-mediated functions are being increasingly recognized as sensitive and critical targets for the action of toxic metals such as  $\text{Cd}^{2+}$  (3, 52, 58, 65).  $\text{Cd}^{2+}$  and other toxic metals are known to bind to and interact with receptor proteins on the cell surface, with ion channels proteins, or with intracellular proteins controlling  $\text{Ca}^{2+}$  homeostasis. The listed studies above have shown that  $\text{Cd}^{2+}$  provokes an immediate production of  $\text{IP}_3$  supporting that  $\text{Cd}^{2+}$  may interfere with receptors responsible for  $\text{IP}_3$ -dependent  $\text{Ca}^{2+}$ -signalling.

Recent studies have provided evidence that  $\text{Ca}^{2+}$  besides serving as an intracellular second messenger also serves a hormone-like role as an extracellular "first-messenger". Evidence for that came about with the cloning of an extracellular  $\text{Ca}^{2+}$ -sensing receptor (CaR) from bovine parathyroid gland (13). This receptor plays a central role in the homeostatic system responsible for maintenance of constant blood  $\text{Ca}^{2+}$ -levels. When subjected to increased levels of extracellular  $\text{Ca}^{2+}$  ( $\text{Ca}^{2+}_o$ ), cells expressing CaR respond with activation of PLC leading to accumulation of  $\text{IP}_3$  and consequent release of  $\text{Ca}^{2+}$  from intracellular stores (for reviews see 14, 15, 31). Moreover, the kidney, like the parathyroid, is able to respond directly to alterations in extracellular  $\text{Ca}^{2+}$  with the resultant modulation of mineral ion transport, i.e. elevations of  $\text{Ca}^{2+}_o$  activate the CaR in the thick ascending limb (TAL)/distal segment

and lead to reduced reabsorption of  $\text{Ca}^{2+}$  (and  $\text{Mg}^{2+}$ ) and hence increased  $\text{Ca}^{2+}/\text{Mg}^{2+}$  excretion in the urine. (see refs. 1, 16, 32). Also, it is likely that CaR is expressed in many different nephron segments and that the polarity varies with cell type along the nephron, e.g. CaR is exclusively expressed at the basolateral surface of distal tubule cells (16, 50).

It is also possible that CaR recognizes other agonists than  $\text{Ca}^{2+}$ , e.g. CaR is activated by extracellular  $\text{Mg}^{2+}$ ,  $\text{Gd}^{3+}$ , organic polycations as neomycin (12, 46). Even  $\text{Cd}^{2+}$  has been recognized as a possible CaR-agonist due to the stimulation of  $\text{IP}_3$ -generation (21, 57). Therefore, in order to confirm and extend our previous observations we decided to examine whether  $\text{Cd}^{2+}$  evokes  $\text{Ca}^{2+}$ -mobilization in A6 cells by extending the previous obtained  $I_{\text{sc}}$ -experiments with additional experiments and by direct measurements of intracellular  $\text{Ca}^{2+}$  using the fluorescent probe, fura-2. Also, the involvement of  $\text{IP}_3$  was examined by using  $\text{IP}_3$ -binding studies.

## MATERIALS & METHODS

### Cell culture

A6 cells, a line derived from the distal tubule of *Xenopus laevis* kidney, were purchased from the American Type Culture Collection (Rockville, MD, USA), at serial passage 67. All experiments were conducted with cells at passage 80-113 grown at  $26^\circ\text{C}$  in a humidified atmosphere of 5%  $\text{CO}_2$  in air. The cells were cultured as previously described (23). When cells were confluent and exhibited dome formation (5-10 days), they were subcultured by incubation in 2 ml  $\text{Ca}^{2+}$ - $\text{Mg}^{2+}$ -free amphibian salt solution with 0.25% (w/v) trypsin containing 110 mM NaCl, 2.5 mM  $\text{NaHCO}_3$ , 3 mM KCl, 1 mM  $\text{KH}_2\text{PO}_4$ , 1 mM EGTA and 5 mM glucose (pH 7.6). Upon detachment from the culture flask (3-5 minutes), the subculture medium was removed. Five to ten minutes later, the effect of trypsin was neutralized by adding 5 ml culture medium. The cells were resuspended and used for experiments. In electrochemical experiments, the cells were seeded onto membrane inserts in snap wells (Transwell, 0.45  $\mu\text{m}$  poresize, Costar) at a seeding density of about  $5 \cdot 10^5$  cells/well ( $1 \text{ cm}^2$ ). The cells were supplemented with growth medium for 7-8 days to obtain confluent monolayers. The ion transport capacities were improved by preincubation of the epithelia with 1  $\mu\text{M}$  aldosterone 24 hours before performing the experiments (7). In fluorescent experiments, cell suspension at a density of about  $5 \cdot 10^5$  cells/cuvette (500  $\mu\text{l}$ ) was used.

### Electrophysiological measurements

To study active transepithelial ion transport, monolayers of cells were mounted in a modified Ussing chamber bathed from both sides in aerated Ringer solutions as described below and kept at room temperature. Each half-chamber housed a potential-sensing KCl-electrode (agar bridge saturated with KCl) and an Ag-AgCl current passing electrode. All electrodes were connected to a multichannel Voltage/Current Clamp amplifier (WPI EVC-4000) enabling one to measure the potential difference and short-circuit-current ( $I_{\text{sc}}$ ) across the monolayer. Conductance ( $G_{\text{te}}$ ) was determined at 300-s intervals by passing a 10-mV pulse of 3 sec duration. The  $I_{\text{sc}}$  and  $G_{\text{te}}$  were continuously recorded on a strip-chart recorder. Cell integrity was assessed by monitoring the transepithelial resistance ( $R_{\text{te}}$ ) giving that  $G_{\text{te}}$  equals  $1/R_{\text{te}}$ .

### $\text{IP}_3$ -binding

The A6 cells were subcultured as described above and  $0.8 \cdot 10^6$  cells/300  $\mu\text{l}$  were prepared in accordance with the guidelines given for the assay system (Kit: TRK 1000) purchased from Amersham (Life Science, UK). Shortly, 300  $\mu\text{l}$  cell suspension were mixed with 0.2 volume ice-cold 20% perchloric acid, and incubated on ice for 20 minutes. A small amount was decanted for protein determination according to the Bradford method (10). The cell suspension was then centrifuged at 2000 g for 15 min. at  $15^\circ\text{C}$  whereupon the supernatant were decanted into plastic tubes and neutralized with ice-cold 10 M KOH to pH 7.5. Finally, the neutralized supernatant was diluted  $4 \times$  in millipore water

before running the assay. The principle behind the assay is that unlabelled  $\text{IP}_3$  competes with a fixed amount of [ $^3\text{H}$ ]-labelled  $\text{IP}_3$  for a limited number of bovine adrenal  $\text{IP}_3$  binding proteins. The bound  $\text{IP}_3$  is then separated from the free  $\text{IP}_3$  by centrifugation. The free  $\text{IP}_3$  in the supernatant is discarded by simple decantation, leaving the bound fraction adhering to the tube. The amount of unlabelled  $\text{IP}_3$  in the sample is calculated from a standard curve using the  $^3\text{H}$  counts. Nonspecific binding measured in the presence of 1 nM  $\text{IP}_3$  was typically 10% of the total count. Specific binding was typically 30 % of the total count. Moreover, the used concentration of  $\text{CdCl}_2$  did not affect the binding capacity of the binding protein. The measurements were performed on a Wallack scintillation counter model 1409. Data were analysed by computer assisted curve-fitting to a logistic equation, which together with the protein content allowed calculation of the specific  $\text{IP}_3$ -content as pmol  $\text{IP}_3$ /mg protein. Pilot experiments indicated that the  $\text{IP}_3$ -content of control cells did not change significantly during a typical time course of experiment, i.e. 60 sec of exposure.

### *$\text{Ca}^{2+}$ measurements*

All experiments were performed with isolated A6 cells after 4-8 days of growth. To monitor intracellular calcium concentrations, the fluorescent probe Fura-2/AM (Molecular Probes, Leiden, NL) was used. In order to increase uptake of the dye was mixed 1:1 with pluronic acid, a mild nonionic surfactant (Molecular Probes, Leiden, NL) prior to the loading of cells. Isolated cells suspended in DMEM were loaded with 500  $\mu\text{M}$  Fura-2/AM on a rocking device at room temperature for 30 minutes while covered in aluminium foil. Ten minutes before the end of loading, 50  $\mu\text{M}$  TPEN (tetrakis-(2-pyridylmethyl)-ethylenediamine) and probenecid were added to the cell suspension. TPEN is a membrane permeant chelator with extremely high affinity for heavy metals (35, 51) and 5 mM probenecid is capable of inhibiting the organic anion-transporter responsible for the efflux of the dye (19, 20, 43, 44). TPEN treatment did not affect the basal Fura-2 -fluorescence but reversed the 50  $\mu\text{M}$   $\text{Cd}^{2+}$ -induced fura-2 fluorescence increase. Since we had a high signal/background ratio, we concluded that the loading procedure was acceptable. Furthermore, we assume that the use of DMEM during loading and the short time of loading help prevent cell damage (11). After the loading, a small volume of isolated cells (about  $5 \cdot 10^5$  cells per experimental datum) was washed and resuspended three times (two minutes at 180 g) in normal Ringer solution (NRS) under gentle stirring in a plastic tube.  $\text{Ca}^{2+}$ -free experiments were performed by replacing NRS with  $\text{Ca}^{2+}$ -free Ringer solution during the last washing of the cells. All experiments were carried out in a quartz cuvette with a total sample volume of 500  $\mu\text{l}$  containing 5 mM probenecid. Preliminary studies revealed that probenecid at the concentration used did not damage the cells during the time course of the experiments. Also, probenecid did not influence the basal level of  $\text{Ca}^{2+}$ . Fluorescence was measured on a Perkin Elmer Luminescence spectrophotometer, model LS50B. The excitation wavelength was set to alternate between 340 and 380 nm (10 nm slit width) and the emission wavelength was monitored at 540 nm (10 nm slit width). The fluorescence intensity ratio ( $I_{340}/I_{380}$ ) was measured every 20 ms and plotted graphically using the FLDM-software connected to the Luminescence spectrometer. Routinely, a calibration program was done on the same cell batch (8 samples in total) as the one used during experiments to determine the limiting values of the ratio  $I_{340}/I_{380}$  when the probe is in its  $\text{Ca}^{2+}$ -saturated form ( $R_{\text{max}}$ ) and in its  $\text{Ca}^{2+}$ -free form ( $R_{\text{min}}$ ) by adding the detergent triton X-100 and excess of EGTA (50 mM) to the cell suspension, respectively. The calcium concentration used to obtain  $R_{\text{max}}$  was 1 mM. Autofluorescence of the chemicals used and cells not loaded with fura-2 was also measured and subtracted from all test values.

A small fura-2 leak occurred through the cell membranes into the extracellular space in presence of 100 mM  $\text{Mn}^{2+}$ , which quenches fura-2 fluorescence. The leak was estimated to be  $0.63 \pm 0.05$  % per min. ( $n = 3$ ). In addition, the last wash was examined for Fura-2-content by adding 1 mM  $\text{Cd}^{2+}$  and comparing the deflection with the one obtained when 1 mM  $\text{Cd}^{2+}$  was added to Fura-Na dissolved in  $\text{Ca}^{2+}$ -free NRS. We found that  $\text{Cd}^{2+}$  caused a deflection of 2.8 % of what was observed when  $\text{Cd}^{2+}$  was added to Fura-Na solution indicating that only a very small part of Fura-2 was present in the extracellular space when the experiments began. As the majority of our experiments showed effects that was greater

than 100%, the small leak of fura-2 could not explain the changes in the fluorescent  $\text{Ca}^{2+}$  signal. Furthermore, the extend of fura-2 compartmentalization was estimated by adding the membrane permeabilizer, digitonin (50  $\mu\text{M}$ ) and next triton X-100 (1 % v/v), which permeabilize and release dye from subcellular organelles. The fraction of total intracellular dye that was compartmentalized was calculated according to Kao (1994) and was  $8.5 \pm 0.6$  % ( $n = 4$ ).

### Statistics and calculations

We have previously shown that basolateral addition of 1 mM  $\text{CdCl}_2$  to A6 epithelia did not change  $R_{te}$  markedly in the first 40 minutes (23). Therefore, to assure that cell integrity during  $I_{sc}$ -experiments was not influenced by  $\text{Cd}^{2+}$ , all experiments were terminated within 40 minutes after addition of  $\text{Cd}^{2+}$ . The increase in  $I_{sc}$  ( $\Delta I_{sc}$ ) was calculated as the difference in  $I_{sc}$  before addition of the agent and the steady or maximal  $I_{sc}$ -level reached after addition of the agent. At least one monolayer from the same plating served as control for the other monolayers. Fluorescence results will often be presented as the difference in  $I_{340}/I_{380}$ -ratio before and after addition of an agent and are expressed as relative fluorescence  $\Delta F_{agent}$ . To calculate the intracellular  $\text{Ca}^{2+}$  concentration, Grynkiewicz' equation was used, with a  $K_d$ -value of 224 nM as reported by Grynkiewicz *et al.* (1985).

$$[\text{Ca}^{2+}]_i = K_d \cdot \left( \frac{R - R_{\min}}{R_{\max} - R} \right) \cdot \left( \frac{s_{f2}}{s_{b2}} \right)$$

The factor  $s_{f2}/s_{b2}$  represents the ratio of the measured fluorescence intensity when all dye is  $\text{Ca}^{2+}$  free and the intensity measured when all the dye is saturated with  $\text{Ca}^{2+}$ , both measurements taken at 380 nm.

Results are expressed as means  $\pm$  SEM and were analysed statistically using one-way ANOVA multiple comparisons of mean values between groups. If ANOVA detected differences between groups analysed, the data were tested by F-test to evaluate for differences in variance and then further by using two-tailed Student t-test. P-values of less than 5% were considered significant.

### Chemicals & Solutions

The solutions used both in electrochemical and fluorescence experiments had the following compositions: Normal Ringer solution, NRS (in mM):  $\text{Na}^+$ , 115;  $\text{K}^+$ , 2.5;  $\text{Cl}^-$ , 117;  $\text{Ca}^{2+}$  1;  $\text{CO}_3^{2-}$ , 2.5.  $\text{Ca}^{2+}$ -free Ringer (in mM):  $\text{Na}^+$ , 115;  $\text{K}^+$ , 2.5;  $\text{Cl}^-$ , 115;  $\text{CO}_3^{2-}$ , 2.5; EGTA, 0.1. The pH was in all cases 7.4. A final concentration of 5 mM glucose was used during all experiments.

Metals, thapsigargin, neomycin, triton X-100, U73122 and 3, 4, 5, -trimethoxybenzoic acid-8-(diethylamino)octyl ester (TMB-8) were purchased either from Sigma, USA or from Aldrich, Germany. Fura-2/AM, digitonin, BAPTA/AM and TPEN were purchased from Molecular Probes (Leiden, NL). If the chemicals were dissolved in dimethylsulphoxide (DMSO) a final maximum concentration of 1% (v/v) of the solvent was allowed. In control epithelia, DMSO at 1% (v/v) had no effect on baseline  $I_{sc}$  or fluorescence intensity. All drugs were of the highest purity available.

## RESULTS

### Apical versus basolateral effects of $\text{Cd}^{2+}$ on $I_{sc}$

Addition of  $\text{Cd}^{2+}$  to the basolateral surface of A6-monolayers caused a dose-dependent increase of  $I_{sc}$  showing a prompt and transient nature with a half maximal stimulation concentration ( $H_{0.5}$ ) of  $385.9 \pm 10.7$   $\mu\text{M}$  ( $n = 6$ , figure 1). The maximum stimulation concentration, 1 mM, caused  $I_{sc}$  to increase from  $2.3 \pm 0.3$  to  $10.6 \pm 0.8$   $\mu\text{A}/\text{cm}^2$  ( $n = 25$ ,  $p < 0.001$ ) within seconds after administration. The activation was sustained for less than five minutes before  $I_{sc}$  returned to basal level. Previously we showed that  $\text{Na}^+$ -transport was not involved in the observed  $\text{Cd}^{2+}$ -mediated activation of  $I_{sc}$  (23). To examine whether the observed  $\text{Cd}^{2+}$ -induced  $I_{sc}$  ( $\Delta I_{sc(\text{Cd})}$ ) was a side-specific effect or a general effect due to the movement of

$\text{Cd}^{2+}$  across the cell membranes, 1 mM  $\text{Cd}^{2+}$  was applied to both surfaces of A6 cell monolayers in order to achieve maximal response. As demonstrated in figure 1, when 1 mM  $\text{Cd}^{2+}$  was added to the basolateral side the response differed completely from that observed when  $\text{Cd}^{2+}$  was applied to the apical side, as basolateral  $\text{Cd}^{2+}$  exposure caused a  $\Delta I_{\text{sc(Cd)}}$  of  $8.3 \pm 0.6$  (n = 25) and apical exposure a  $\Delta I_{\text{sc(Cd)}}$  of  $-1.5 \pm 0.1$  (n = 3). This suggests that the action of  $\text{Cd}^{2+}$  is side-specific, justifying further examination of both apical and basolateral  $\text{Cd}^{2+}$ -exposure. However, because of the prompt and transient nature of  $\Delta I_{\text{sc(Cd)}}$  during basolateral treatment, further studies focussed on basolateral  $\text{Cd}^{2+}$ -treatment only.

Indirect evidence suggests that  $\text{Ca}^{2+}$ -mobilization is involved in  $\Delta I_{\text{sc(Cd)}}$  (23) why direct measurements of intracellular  $\text{Ca}^{2+}$  using fura-2 were implemented. To examine how  $\text{Cd}^{2+}$  may cause  $\text{Ca}^{2+}$ -mobilization, the possible role of CaR activation was studied by use of known inhibitors and stimulators of its action.

#### *Actions of PLC-inhibitors on $\text{Cd}^{2+}$ -stimulated $I_{\text{sc}}$*

The involvement of PLC-dependent activation of  $\text{Cd}^{2+}$ -stimulated  $I_{\text{sc}}$  was examined using U73122, a membrane permeable aminosteroid that blocks the phosphatidylinositol-specific PLC (34). As shown in figure 2, preexposure of confluent A6 cell monolayers to 10  $\mu\text{M}$  U73122 at the basolateral side resulted in almost total cancellation of  $\Delta I_{\text{sc(Cd)}}$  at both 100  $\mu\text{M}$   $\text{Cd}^{2+}$  and 1 mM  $\text{Cd}^{2+}$  as  $\Delta I_{\text{sc(Cd)}}$  was diminished to  $17.4 \pm 9.0$  % and  $9.3 \pm 3.5$  % of control level, respectively (n = 4 and p < 0.01 in both cases). Further experiments were carried out with neomycin, an aminoglycoside antibiotic that has often been used as an inhibitor of PLC-mediated signalling processes (6, 34, 56). Pretreatment with 500  $\mu\text{M}$  neomycin completely abolished  $\Delta I_{\text{sc(Cd)}}$  at 100  $\mu\text{M}$  of  $\text{Cd}^{2+}$ -exposure as  $\Delta I_{\text{sc(Cd)}}$  was diminished to  $6.3 \pm 4.1$  % (n = 3, p < 0.01). However, at 1000  $\mu\text{M}$   $\text{Cd}^{2+}$  neomycin had no significant effect on  $\Delta I_{\text{sc(Cd)}}$  compared with cells not pretreated with neomycin (figure 2) suggesting that neomycin is not as potent or specific a PLC-inhibitor as U73122. Subsequent permeabilization of the apical membrane with 300 U/ml nystatin, resulted in a prompt increase of  $I_{\text{sc}}$  showing that  $\text{Cd}^{2+}$  did not inhibit the basolateral Na-K-ATPase activity prior to treatment with nystatin as has been shown in another study (41).

#### *$[\text{Ca}^{2+}]_i$ -mobilization caused by external $\text{Cd}^{2+}$*

The test concentration of  $\text{Cd}^{2+}$  was set at  $\text{H}_{0.5}$ -level, i.e. 400  $\mu\text{M}$  in the subsequent experiments. The basal concentration of free calcium ions in the cytoplasm ( $[\text{Ca}^{2+}]_i$ ) of isolated, fura-2-loaded A6 cells were  $111 \pm 7$  nM determined in 73 experiments.  $[\text{Ca}^{2+}]_i$  rose steeply to peak-values of  $579 \pm 61$  nM (n = 23) within  $15 \pm 1$  seconds when stimulated with 400  $\mu\text{M}$   $\text{Cd}^{2+}$ , and declined afterwards to control level or slightly above control level within 3 minutes (figure 3). When the fluorescence intensity at peak height was compared with the basal level,  $\text{Cd}^{2+}$  displayed a peak/basal-ratio of  $6.1 \pm 0.6$  (n = 23). Consistent with the previously obtained  $I_{\text{sc}}$ -results, dose-response studies showed that below 10  $\mu\text{M}$   $\text{Cd}^{2+}$  fura-2 loaded A6-cells responded marginally whereas above this threshold the response was dose-dependent (figure 3, inserted).

Studies of the effects of  $\text{Cd}^{2+}$  on intracellular  $\text{Ca}^{2+}$  homeostasis using fura-2 is hampered by the fact that divalent metal ions like  $\text{Cd}^{2+}$  also binds to the probe and cause fluorescence often more intense than that of the  $\text{Ca}^{2+}$  complex (35). However, this requires that cadmium enters the cells in its free form. As described in methods the cells were incubated with the heavy metal chelator, TPEN, before carrying out the experiments to prevent interactions with  $\text{Ca}^{2+}$ -fura-complex. To examine whether  $\text{Cd}^{2+}$  entered the cells and were processed by TPEN, pilot experiments under  $\text{Ca}^{2+}$ -free conditions were performed. A6 cells were bathed in  $\text{Ca}^{2+}$ -free Ringer and after 10 minutes 400  $\mu\text{M}$   $\text{Cd}^{2+}$  was added to the cell suspension preexposed with 0.8  $\mu\text{M}$  thapsigargin (TG), a potent inhibitor of ATPases in ER (37, 63), or to TG-untreated cells. As demonstrated in figure 4, TG significantly reduced the  $\text{Cd}^{2+}$ -induced increase of fluorescence from  $1.1 \pm 0.2$  (n = 4, p < 0.01) in TG-untreated cells to  $0.4 \pm 0.1$  (n = 7) in TG-pretreated cells. Thus, the obtained results suggest that the observed  $\text{Cd}^{2+}$ -evoked fluorescence transients depend on  $\text{Ca}^{2+}$  mobilization.

### *Actions of PLC-inhibitors on Cd<sup>2+</sup>-induced Ca<sup>2+</sup>-mobilization*

Using U73122 and neomycin in Ca<sup>2+</sup>-measurements demonstrated that 10  $\mu$ M U73122 partially suppressed  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  at 400  $\mu$ M and totally at 100  $\mu$ M. (figure 5A & table 1). Thus, pretreatment with U73122 and subsequent addition of 100  $\mu$ M Cd<sup>2+</sup> prevented the increase in  $[\text{Ca}^{2+}]_{\text{i}}$  that occurred in the absence of U73122 as  $[\text{Ca}^{2+}]_{\text{i}}$  was  $69 \pm 16$  nM ( $n = 3$ ,  $p < 0.05$ ) compared with  $503 \pm 106$  nM ( $n = 4$ ) in control cells. Neomycin was an even more potent inhibitor of Cd<sup>2+</sup>-mediated Ca<sup>2+</sup>-increase ( $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$ ) than U73122 as 250  $\mu$ M neomycin almost cancelled the control response at 400  $\mu$ M Cd<sup>2+</sup> (figure 5B and table 1). Hence,  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  dropped from  $579 \pm 61$  nM ( $n = 23$ ) in control cells to  $50 \pm 13$  nM ( $n = 5$ ) in neomycin preexposed cells ( $p < 0.001$ ) corresponding to peak/basal-ratios of  $6.1 \pm 0.6$  and  $0.4 \pm 0.1$ , respectively. These data indicate that  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  is dependent upon PLC-sensitive pools with neomycin being the most potent inhibitor of  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  at the given concentrations used.

### *Origin of the Cd<sup>2+</sup>-induced Ca<sup>2+</sup> increase*

To investigate the origin of the Cd<sup>2+</sup>-induced transient increase in Ca<sup>2+</sup>, TG and TMB-8, a benzoic acid derivative reported to abolish the Ca<sup>2+</sup>-mobilization from IP<sub>3</sub>-sensitive stores in rat kidney (53), were used. As illustrated in figure 6 and 7 the two agents displayed different effects on Ca<sup>2+</sup>. TG (0.8  $\mu$ M) induced an increase in Ca<sup>2+</sup>, which remained at a plateau level of  $337 \pm 59$  nM ( $n = 8$ ). TMB-8 (100  $\mu$ M) induced a fast and transient Ca<sup>2+</sup> increase with a peak level of  $1269 \pm 233$  nM ( $n = 6$ ) corresponding to a peak/basal-ratio of  $14.9 \pm 3.7$  (table 1) before returning to values similar to those measured before TMB-8 addition. Pretreatment with TMB-8 or TG almost abolished  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  as the peak/basal-ratio in both cases was  $0.4 \pm 0.1$  ( $n = 7$  for TMB-8 and  $n = 4$  for TG) compared with a control level of  $6.1 \pm 0.6$  ( $n = 23$ , table 1). Preexposure with Cd<sup>2+</sup> and subsequent addition of TG or TMB-8 increased  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  to  $383 \pm 67$  nM or to  $1084 \pm 252$  nM ( $n = 7$  in both cases), respectively, which was insignificantly different from their respective control levels mentioned above (figure 6 and 7 and table 1). This demonstrates that the intracellular pools are the main source of  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$ . Moreover, Cd<sup>2+</sup> pre-exposure did not completely empty the pools as the subsequent addition of TG or TMB-8 showed responses that resembled the corresponding control responses.

### *Interactions between Cd<sup>2+</sup> and related metals*

Unpublished data indicates that Zn<sup>2+</sup> and Ni<sup>2+</sup> probably share similar effects with Cd<sup>2+</sup> regarding their ability to induce Cl<sup>-</sup>-secretion in A6-cells, which is why the effect of these cations on  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  was examined. As shown in figure 8, both metals induced Ca<sup>2+</sup>-mobilization in a Cd<sup>2+</sup>-like fashion, i.e. they too displayed transient characteristics with a very fast kinetic. In fact, both metals (400  $\mu$ M) were more potent inducers than Cd<sup>2+</sup>; peak-levels for Zn<sup>2+</sup> and Ni<sup>2+</sup> were  $1116 \pm 210$  nM ( $n = 7$ ) within  $14 \pm 1$  seconds and  $868 \pm 119$  nM ( $n = 5$ ) within  $16 \pm 2$  seconds, respectively (table 1). This corresponds to peak/basal-ratios of  $14.0 \pm 2.7$  and  $11.0 \pm 1.8$ , respectively and was about twofold higher than the corresponding Cd<sup>2+</sup>-level of  $6.1 \pm 0.6$  ( $n = 23$ ). Pretreatment with either Zn<sup>2+</sup> or Ni<sup>2+</sup> prevented the Cd<sup>2+</sup>-inducible Ca<sup>2+</sup>-increase normally observed with Zn<sup>2+</sup> being the most potent cancelling metal. Hence, Zn<sup>2+</sup> and Ni<sup>2+</sup> reduced the peak/basal-ratio of Cd<sup>2+</sup> to  $0.3 \pm 0.1$  and  $0.8 \pm 0.1$  ( $n = 4$  in both cases), respectively. These data confirm and extend the previous findings in the sense that the similar metals Cd<sup>2+</sup>, Zn<sup>2+</sup> and Ni<sup>2+</sup> evoke Ca<sup>2+</sup> transients and Cl<sup>-</sup>-secretion in A6 cells by similar mechanisms. Finally, we determined if Cd<sup>2+</sup> triggers the mobilization of Ca<sup>2+</sup> via the IP<sub>3</sub>-signalling pathway as expected if intracellular stores are involved.

### *IP<sub>3</sub> accumulation in cation activated cells*

Resting IP<sub>3</sub>-levels, measured with the receptor binding assay, were  $272.2 \pm 51.7$  pmol · mg protein in A6 cell suspension ( $n = 30$ ) which is about a factor 20 higher than observed in neuroblastoma × glioma



cells (34) and a factor 4 higher than observed in E367 neuroblastoma cells (3). As shown in figure 9, exposure to 400  $\mu\text{M}$   $\text{Cd}^{2+}$  showed a time dependency as the  $\text{IP}_3$ -concentration rose to  $257.3 \pm 114.2$  ( $n = 3$ ),  $399.6 \pm 132.3$  ( $n = 14$ ) and  $668.2 \pm 156.6$  pmol/mg protein ( $n = 18$ ,  $p < 0.05$  compared with resting level) in cells exposed for 15, 30 and 60 sec, respectively. The exposure time was set at 60 sec in the subsequent experiments to obtain a high  $\text{IP}_3$ -response.

Both  $\text{Cd}^{2+}$  and  $\text{Zn}^{2+}$  were able to increase the  $\text{IP}_3$ -content significantly above control level (figure 10). Hence, activation of the cells for 60 sec with 400  $\mu\text{M}$   $\text{Cd}^{2+}$  and  $\text{Zn}^{2+}$  increased the  $\text{IP}_3$ -content significantly to  $668.2 \pm 156.6$  ( $n = 18$ ,  $p < 0.02$ ) and  $957.6 \pm 229.0$  ( $n = 8$ ,  $p < 0.01$ ) in comparison with resting levels as mentioned above.

Preincubation of cells with the PLC-inhibitor U73122 (5  $\mu\text{M}$ ) for 2 min completely suppressed  $\text{Cd}^{2+}$ -induced  $\text{IP}_3$ -generation (figure 10, inserted). Thus, the  $\text{Cd}^{2+}$ /control-ratio of  $\text{IP}_3$ -accumulation increased to  $2.2 \pm 0.5$  ( $n = 4$ ) whereas U73122 pretreated cells demonstrated a  $\text{Cd}^{2+}$ /control-ratio of  $0.2 \pm 0.2$  ( $n = 3$ ). This suggests that U73122 function as an effective inhibitor of PLC since the  $\text{IP}_3$ -level was not different from the resting level. Moreover, these data show that U73122 is a potent inhibitor of  $\text{Cd}^{2+}$ -inducible  $\text{IP}_3$ -generation.

## DISCUSSION

When A6 cells are treated with  $\text{Cd}^{2+}$  a persistent, prompt and transient increase in  $I_{\text{sc}}$  is observed only when administered to the basolateral surface. Previously we have shown that the transient increase was independent on  $\text{Na}^+$ -transport (23) and entirely relied on  $\text{Cl}^-$ -transport (25). Furthermore, the studies suggested the involvement of  $\text{Ca}^{2+}$ -mobilization as  $\text{Ca}^{2+}$ -depletion and pretreatment with TG almost cancelled  $\Delta I_{\text{sc}(\text{Cd})}$ . In regard to this, we were encouraged to perform additional  $\text{Ca}^{2+}$ -experiments.

### *Cadmium and fura-2*

$\text{Cd}^{2+}$  exhibits high affinity towards fura-2 blunting the measurements of intracellular  $\text{Ca}^{2+}$  and subsequent interpretation of the obtained results. In the following a number of arguments will be listed, which demonstrate that intracellular  $\text{Ca}^{2+}$  is in fact being measured and not the binding of  $\text{Cd}^{2+}$  to the probe: 1)  $\text{Cd}^{2+}$  evoked an immediate transient increase in fluorescence that is not to be expected if  $\text{Cd}^{2+}$  binds to the probe since the fluorescence would remain at high level as observed when  $\text{Cd}^{2+}$  was added to Fura-Na (data not presented). 2) Addition of the  $\text{Cd}^{2+}$ -chelator TPEN showed no effect on  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  as expected if  $\text{Cd}^{2+}$  were bound to the probe. Furthermore, figure 4 also demonstrates that fura-2 was not present in the extracellular phase. Otherwise EGTA would cause the fluorescence to drop immediately due to the presence of  $\text{Cd}^{2+}$ . This is expected as the cell suspensions were pre-loaded with probenecid (see methods). Accordingly, the leak rate of the fura-2 was estimated to be considerably lower than previously reported in A6 cells (11) indicating that probenecid actually reduces the leakage rate. Finally, using BAPTA/AM, a membrane permeable  $\text{Ca}^{2+}$  chelator proved that  $\text{Cd}^{2+}$ -induced increase in fluorescence only involves  $\text{Ca}^{2+}$  as BAPTA/AM caused fluorescence to dropped to basal level. 3) Dose-response experiments revealed marked effects only above 10  $\mu\text{M}$ . If an intracellular  $\text{Cd}^{2+}$ -fura-2-complex was present maximum intensity was obtained at much lower concentrations (500 nM  $\text{Cd}^{2+}$  gave maximum binding of fura-Na in pilot experiments). 4) Preexposure with the non-autofluorescence  $\text{Ca}^{2+}$ -modulating agents neomycin, TMB-8 and TG abolished  $[\text{Ca}^{2+}]_{\text{Cd}}$ , which would not occur if  $\text{Cd}^{2+}$  binds to the probe. 5) Depleting the cells for  $\text{Ca}^{2+}$  using TG reduced  $[\text{Ca}^{2+}]_{\text{Cd}}$  significantly. In the light of this, it can be concluded that the observed effects on fluorescence in fura-2-loaded cells caused by extracellular  $\text{Cd}^{2+}$  are actually due to  $\text{Ca}^{2+}$ -mobilization and not the binding of  $\text{Cd}^{2+}$  to the probe.

### *Involvement of $\text{Ca}^{2+}_i$ in $\text{Cd}^{2+}$ -induced transients*

In subsequent fura-2 experiments, we decided to use  $\text{Cd}^{2+}$  at a concentration that corresponds to the  $H_{0.5}$ -level determined in  $I_{\text{sc}}$ -experiments, i.e. 400  $\mu\text{M}$ . We found that  $\text{Cd}^{2+}$  evoked a  $\text{Ca}^{2+}$  transient in a hormone-like fashion, which has also been observed in human fibroblasts (57) and E367 neuroblastoma

cells (3). To emphasize the importance of  $\text{Ca}^{2+}$ -mobilization during  $\text{Cd}^{2+}$ -evoked transients, experiments were performed under  $\text{Ca}^{2+}$ -free conditions. Hence, the typical transient peak as seen under physiological conditions was totally absent in cells pretreated with TG. Moreover,  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  was about 64 % lower in TG-pretreated cells than in control cells. Since total depletion of internal  $\text{Ca}^{2+}$  stores is very difficult to achieve and as reported by Brochiero & Ehrenfeld (1997) even cell treatment with  $\text{Ca}^{2+}$ -free medium for 10 minutes did not deplete the internal stores in A6 cells, total  $\text{Ca}^{2+}$ -depletion was not expected. Moreover,  $\text{Cd}^{2+}$  may under those non-physiological conditions, i.e. very low or free  $\text{Ca}^{2+}$  intracellular environment, enter the cells through  $\text{Ca}^{2+}$  channels as emptying of intracellular  $\text{Ca}^{2+}$  stores stimulate entry of extracellular  $\text{Ca}^{2+}$  (capacitative calcium entry) (37, 61). In spite of that, the results strongly suggest that  $\text{Ca}^{2+}$ -mobilization is crucial for the generation of a transient peak evoked by  $\text{Cd}^{2+}$ .

Since no sustained elevation of the resting  $\text{Ca}^{2+}_i$  was observed the possibility that  $\text{Cd}^{2+}$  simple interferes with the control of  $\text{Ca}^{2+}$  fluxes from outside the cells can be excluded. Furthermore, the very fast response ( $15 \pm 1$  sec) argues against physico-chemical interaction of  $\text{Cd}^{2+}$  with intracellular enzymes, e.g. PLC or  $\text{Ca}^{2+}$ -ATPases because such effects would require penetration of  $\text{Cd}^{2+}$  through the plasma membrane, which is slow. Moreover, inhibition of  $\text{Ca}^{2+}$  extruding systems often results in a sustained elevation of  $\text{Ca}^{2+}_i$ , which is not consistent with the transient nature observed in our studies. Measurements of the  $\text{Na}^+$ - $\text{K}^+$ -ATPase activity using the nystatin technique (24) supports this as  $\text{Cd}^{2+}$  did not inhibit the  $\text{Na}^+$ - $\text{K}^+$ -ATPase activity in A6 cells (data not presented), which is indirectly responsible for  $\text{Ca}^{2+}$ -extrusion via the  $\text{Na}^+$ - $\text{Ca}^{2+}$ -exchanger (28; 64).

#### *Origin of $[\text{Ca}^{2+}]_{\text{Cd}}$*

To define the origin of the  $\text{Ca}^{2+}$  release caused by  $\text{Cd}^{2+}$ , TG and TMB-8 were applied to the cell suspensions. We found that  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  was completely annulled in cells pretreated with TMB-8. In addition, TMB-8 induced a prompt and transient increase in  $\text{Ca}^{2+}_i$  that exceeded the levels observed for  $\text{Cd}^{2+}$ . This is unlikely to be an artifact because TMB-8 did not interfere with fura-2 fluorescence. Moreover, similar findings have been observed in fura-2-loaded MDCK-cells using various TMB-8 derivatives (38). As pointed out in other studies, TMB-8 is not a specific blocker of  $\text{Ca}^{2+}$  store release, e.g. TMB-8 has been reported to act as an muscarinic (42) and nicotinic acetylcholine (2) receptor antagonist. Accordingly, it is likely that TMB-8 demonstrates mixed actions on the  $\text{Ca}^{2+}$ -dependent signalling system since mutual cancellation of the  $\text{Cd}^{2+}$ - and TMB-8-evoked  $\text{Ca}^{2+}$ -mobilizations did not occur. In contrast, the  $\text{Ca}^{2+}_i$ -level was sustained when A6-cells were exposed to TG and subsequent addition of  $\text{Cd}^{2+}$  showed significant lower  $\text{Ca}^{2+}_i$  than what was observed in control cells indicating that intracellular pools are the main source of  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$ . Subsequent addition of TG to  $\text{Cd}^{2+}$ -pretreated cells proved no significant difference in TG-amplitude compared with TG-control level suggesting that  $\text{Cd}^{2+}$ , probably due to the fast and transient nature of  $[\text{Ca}^{2+}]_{\text{Cd}}$ , does not empty TG-sensitive stores. Furthermore, under the present experimental conditions we can rule out the possibility that  $\text{Cd}^{2+}$  inhibits the TG-sensitive  $\text{Ca}^{2+}$ -ATPases as has been observed for the ER-derived hepatic microsomal  $\text{Ca}^{2+}$ -ATPase (68) because  $\text{Cd}^{2+}$  pretreatment did not prevent TG to induce a sustained  $\text{Ca}^{2+}_i$  increase (inhibiting effect on  $\text{Ca}^{2+}$ -ATPases evoked by  $\text{Cd}^{2+}$  is reviewed by Beyersmann & Hectenberg, 1997). Nevertheless, we cannot rule out that  $\text{Cd}^{2+}$  is able to inhibit TG-sensitive ATPase under different experimental conditions since the cells were pre-loaded with TPEN allowing no intracellular  $\text{Cd}^{2+}$  to occur in its active ionic form.

#### *PLC-inhibitor studies*

Transient  $\text{Ca}^{2+}$  responses are often caused by hormone stimulation, which involves binding of the agonist to its plasma membrane receptor, activation of the G-protein coupled PLC, resulting in generation of  $\text{IP}_3$  and diacylglycerol (for reviews see 4, 17, 36). Thus, to investigate if  $[\text{Ca}^{2+}]_{\text{Cd}}$  involves hormonal signalling, experiments with the two PLC-inhibitors U73122 and neomycin were performed.  $I_{\text{sc}}$ -experiments revealed that U73122 cancelled  $\Delta I_{\text{sc}(\text{Cd})}$  whereas neomycin could only cancel  $\Delta I_{\text{sc}(\text{Cd})}$  at lower

doses of  $\text{Cd}^{2+}$ . Contrary to the  $I_{\text{sc}}$ -experiments, U73122 abolished  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  at 100  $\mu\text{M}$   $\text{Cd}^{2+}$  whereas at 400  $\mu\text{M}$   $\text{Cd}^{2+}$  the cancellation, though significant, was partial. This paradox is difficult to explain, but it may be due to different experimental setups as  $I_{\text{sc}}$ -experiments were measured on confluent cells and the fura-2-experiments were measured on cell suspensions. To address this topic further studies are necessary. Nevertheless, at 100  $\mu\text{M}$   $\text{Cd}^{2+}$  the fura-data are in accordance with the  $I_{\text{sc}}$ -experiment, which supports the notion that  $\text{Cd}^{2+}$ -transients are a result of receptor-interactions that relies on PLC-activation. Besides being used as PLC-inhibitor, neomycin is also a well-known CaR-agonist (30, 59, 66). The fact that neomycin only inhibits  $\Delta I_{\text{sc(Cd)}}$  at lower doses suggests that neomycin may function as a CaR-modulator rather than a PLC-inhibitor in A6 cells. The different effects of neomycin and U73122 have also been observed in NG108-15 neuroblastoma×glioma cells where neomycin (3 mM), in contrast to U73122 (10  $\mu\text{M}$ ), failed to inhibit bradykinin-induced  $\text{IP}_3$ -generation (34). Similar results were obtained in MDCK-cells as bradykinin-evoked  $\text{Ca}^{2+}$ -transients were abolished by U73122 (5-10  $\mu\text{M}$ ) and only partially inhibited by neomycin (3 mM) (38). This supports that neomycin is not a selective PLC-inhibitor but rather exhibits different inhibiting characteristics depending on cell type. U73122 demonstrated noticeable effect on  $\Delta I_{\text{sc(Cd)}}$  even at high doses and as in NG108-15 neuroblastoma×glioma cells, U73122 showed pronounced effect on the  $\text{IP}_3$ -generation as discussed below. Thus, assuming that neomycin acts as a CaR-modulator, subsequent addition of 400  $\mu\text{M}$   $\text{Cd}^{2+}$  to neomycin pre-treated cells failed to increase  $\text{Ca}^{2+}_i$ , which suggests that  $\text{Cd}^{2+}$  mimic or interfere with the mechanism(s) of neomycin.

#### *$\text{Cd}^{2+}$ might function as a CaR-agonist in A6 cells*

The fact that  $\text{Cd}^{2+}$  selectively causes  $I_{\text{sc}}$  to increase at the basolateral surface suggests that the mechanism for triggering  $\Delta I_{\text{sc(Cd)}}$  and  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  are due to extracellular events. Otherwise membrane penetration of  $\text{Cd}^{2+}$ , e.g. by diffusion, would cause similar responses at both cell surfaces. Therefore, if  $\text{Cd}^{2+}$  serves as an agonist of CaR, the receptor would necessarily have to be located at the basolateral surface. In fact, in the distal segment of rat kidney cells CaR was exclusively located at the basolateral surface (50). The CaR is unique in the sense that the physiological ligand is an inorganic ion, rather than an organic molecule. Activation of the receptor by increased levels of extracellular  $\text{Ca}^{2+}$  results in the breakdown of phosphoinositide 4,5-diphosphate by PLC and the formation of  $\text{IP}_3$  and diacylglycerol. The resultant increase in levels of  $\text{IP}_3$  mobilizes intracellular  $\text{Ca}^{2+}$  from ER. CaR presumably recognizes other divalent cations than  $\text{Ca}^{2+}$  and even polycations such as neomycin (12, 45). Previously studies have shown that  $\text{Cd}^{2+}$  and other divalent metals mobilized cell  $\text{Ca}^{2+}$  in human skin (57), in E367 neuroblastoma cells (3) and bovine chromaffin cells (65) via an increased generation of  $\text{IP}_3$ . Furthermore, the divalent metals appeared to trigger  $\text{Ca}^{2+}$ -mobilization via a reversible interaction with an external site on the cell surface, which the authors referred to as a " $\text{Cd}^{2+}$ -receptor". Thus, PLC-inhibitor experiments point in the direction that PLC plays an important role for triggering  $\Delta I_{\text{sc(Cd)}}$  and  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$ . Direct measurements of  $\text{IP}_3$  demonstrated that the  $\text{IP}_3$ -generation underwent a 1.45-fold increase proportional to the resting level in A6 cell suspensions, which is very similar to ratios reported in the studies listed above. In addition, preexposure to U73122 completely abolished  $\text{IP}_3$ -generation stimulated by  $\text{Cd}^{2+}$  suggesting that U73122 likely inhibits PLC. Therefore, it seems likely that  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  involves PLC-mediated  $\text{IP}_3$  signalling pathway. Furthermore, extracellular cadmium and calcium both interferes with the hormonal regulation of electrolytes in the distal nephron since it has been shown that  $\text{Ca}^{2+}_o$  decrease anti-diuretic hormone-induced chloride transport by inhibiting cAMP pathway in rat kidney (18) in same way that  $\text{Cd}^{2+}$  did in A6 cells (8).

#### *Interaction studies*

Several studies have demonstrated that metals with similar chemical characteristics as  $\text{Cd}^{2+}$  are protective against biochemical and toxic effects of  $\text{Cd}^{2+}$  in a competitive manner (3, 9, 22, 58, 62). The results obtained in fura-2-loaded cells resembled those observed in  $I_{\text{sc}}$ - and  $\text{Cl}^-$ -transport experiments (25) since pre-treatment with  $\text{Zn}^{2+}$  or  $\text{Ni}^{2+}$  at 400  $\mu\text{M}$  completely abolished  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$ . Furthermore,  $\text{Zn}^{2+}$

and  $\text{Ni}^{2+}$  were even more potent inducers of  $\text{Ca}^{2+}$ -mobilization than  $\text{Cd}^{2+}$ . In contrast, only  $\text{Cd}^{2+}$  induced an increase in  $\text{Ca}^{2+}_i$  in E367 neuroblastoma cells whereas  $\text{Zn}^{2+}$  caused no change in  $\text{Ca}^{2+}_i$  (3). Nevertheless, in human skin fibroblasts (57), bovine chromaffin cells (65) and HEK 293-cells (59) divalent metals, other than  $\text{Cd}^{2+}$ , displayed  $\text{Ca}^{2+}$  mobilizing abilities which depended on  $\text{IP}_3$ -generation. Accordingly,  $\text{Zn}^{2+}$ , like  $\text{Cd}^{2+}$ , was able to induce  $\text{IP}_3$ -generation significantly above control level and in accordance with their ability to induce  $\text{Ca}^{2+}_i$ -transients  $\text{Zn}^{2+}$ , though non-significantly, was the most potent inducer of  $\text{IP}_3$ -generation. Hence, the results confirm and extend our previous findings in the sense that the similar metals  $\text{Cd}^{2+}$ ,  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$  share similar mechanisms regarding the ability to evoke  $\text{Ca}^{2+}$  transients and resulting  $\text{Cl}^-$ -secretion in A6 cells.

### Conclusion

The results indicate that an extracellular cation-sensing receptor may be present in the basolateral membrane of A6 cells, which is activated by extracellular  $\text{Cd}^{2+}$  and possible also  $\text{Zn}^{2+}$  and  $\text{Ni}^{2+}$ . In previous reports, this receptor has been referred to as a "Cd<sup>2+</sup>-receptor". We believe, however, that the newly discovered calcium sensing receptor, CaR, is responsible for the observed effects, which is supported by the fact that CaR recognizes many other cations. Interestingly, the kinetic and dose-response characteristics of  $[\Delta\text{Ca}^{2+}]_{\text{Cd}}$  correspond with those we have previously observed under similar conditions in  $\text{I}_{\text{sc}}$ -experiments (25) suggesting that  $\text{Cd}^{2+}$ -evoked  $\text{Cl}^-$ -secretion and  $\text{Ca}^{2+}_i$ -mobilization are closely connected. We therefore suggest that  $\Delta[\text{Ca}^{2+}]_{\text{Cd}}$  activates  $\text{Ca}^{2+}$ -sensitive  $\text{Cl}^-$ -channels in the apical membrane of A6 cells leading to transcellular  $\text{Cl}^-$ -secretion. Similar results have been obtained in RaKCaR cRNA-injected *Xenopus* oocytes which responded to extracellular  $\text{Ca}^{2+}$ ,  $\text{Mg}^{2+}$ ,  $\text{Gd}^{3+}$  and neomycin with a characteristic activation of  $\text{IP}_3$ -dependent, intracellular  $\text{Ca}^{2+}$ -induced  $\text{Cl}^-$ -secretion (49). Overall, it is suggested that distal tubule nephrotoxicity may be a part of overall renal cadmium toxicity leading to clinical symptoms such as calcuria and in severe cases kidney-stone formation (39, 55, 60) related to disturbances of calcium homeostasis in the distal nephron.

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## FIGURE LEGENDS

**Figure 1.** Time course of short-circuit-current ( $I_{sc}$ ) experiment on confluent A6 cell monolayers. Cadmium (1 mM) exposure of the apical (dotted line) or basolateral (full line) side had completely different effects as 1 mM  $Cd^{2+}$  added to the basolateral side. Inserted figure shows dose-response relationship between  $I_{sc}$ , expressed as % of control, and increasing concentrations of cadmium administered to the basolateral surface of A6 cells. The half maximal stimulation concentration ( $H_{0.5}$ ) was calculated as the 50%-level of maximal  $Cd^{2+}$ -induced stimulation of  $I_{sc}$ . The monolayer was washed with normal Ringer solution between each addition of  $Cd^{2+}$ . Data are expressed as mean  $\pm$  SE of six experiments.

**Figure 2.** (A). Typical time course showing the effects of the PLC-inhibitors, U73122 (full line) and neomycin (dotted line) on basolateral  $Cd^{2+}$ -induced  $I_{sc}$  ( $I_{sc(Cd)}$ ). The control response at 100  $\mu M$   $Cd^{2+}$  is illustrated as the upper punctuated line. U73122 and neomycin were added to the basolateral side of the A6 cell monolayers at 10  $\mu M$  and 500  $\mu M$ , respectively. The apical membrane was permeabilized by nystatin (300 U/ml) to illustrate that the basolateral membrane transport still was intact. (B). Bar diagram displaying the effect of U73122 (10  $\mu M$ ) and neomycin (500  $\mu M$ ) on  $\Delta I_{sc(Cd)}$  at concentrations of 100  $\mu M$  and 1000  $\mu M$ , respectively. n-values are as follows for control, neomycin and U73122 at 100  $\mu M$ ; 4, 3, 4 and at 1000  $\mu M$ ; 24, 4, 4.

**Figure 3.**  $[Ca^{2+}]_i$  measurements in suspensions of fura-2 loaded A6 cells at rest and after application of 400  $\mu M$   $Cd^{2+}$ .  $Cd^{2+}$  evokes a fast and transient increase in  $[Ca^{2+}]_i$ , which within 3 minutes declines to or slightly above basal level. The transient increase is dose dependent as showed in the inserted figure and responds at concentrations of  $Cd^{2+}$  above 10  $\mu M$  which is consistent with the  $I_{sc}$ -results, which is consistent with the  $I_{sc}$ -results. The cell suspension was preloaded with the  $Cd^{2+}$ -chelator, TPEN, 10 minutes before the start of experiment.

**Figure 4.** A typical time course of fluorescence ( $R_{340/380}$ ) performed on fura-2 loaded A6 cells bathed in  $Ca^{2+}$ -free Ringer solution. Pretreatment with 0.8  $\mu M$  thapsigargin causes the 400  $\mu M$   $Cd^{2+}$ -evoked increase in  $R_{340/380}$  to drop significantly and alter the course to a non-transient nature. 5 mM EGTA has only a minor effect on  $R_{340/380}$  implying that extracellular  $Cd^{2+}$  does not contribute to the fluorescence signal and that fura-2 is located in the intracellular environment. Addition of the heavy metal chelator TPEN (50  $\mu M$ ) does not lower  $R_{340/380}$  whereas the intracellular  $Ca^{2+}$  chelator, BAPTA/AM (100  $\mu M$ ) demonstrates a steep drop in  $R_{340/380}$ .

**Figure 5.** Typical time course showing effect of PLC-inhibitors on  $Cd^{2+}$ -induced  $Ca^{2+}$ -mobilization in fura-2 loaded A6-cells (full line). (A) Control cells exposed to 100  $\mu M$   $Cd^{2+}$  (dotted line) and cells pretreated with 10  $\mu M$  U73122. (B) Control cells exposed to 100  $\mu M$   $Cd^{2+}$  (dotted line) and cells pretreated with 250  $\mu M$  neomycin (full line).

**Figure 6.** Time course showing  $[Ca^{2+}]_i$  when cells are exposed to  $Cd^{2+}$  (400  $\mu M$ ) and subsequently to TMB-8 (100  $\mu M$ , dotted line) or conversely (full line). Note that preexposure with TMB-8 almost cancel the  $Cd^{2+}$ -induced increase of  $Ca^{2+}_i$  normally observed.

**Figure 7.** Time course showing  $[Ca^{2+}]_i$  when cells are exposed to  $Cd^{2+}$  (400  $\mu M$ ) and subsequently to TG (0.8  $\mu M$ , dotted line) or conversely (straight line). See legend belonging to figure 6 for additional informations. Inserted figure shows a typical time course of an  $I_{sc}$ -experiment when TG is added to  $Cd^{2+}$ -preexposed A6 cells (data obtained from Faurskov & Bjerregaard, 1997). Note that TG is unable to provoke further increase in  $I_{sc}$  but able to further increase  $Ca^{2+}_i$  following  $Cd^{2+}$  treatment.

**Figure 8.** Interactions between  $Cd^{2+}$  and the two related metals,  $Zn^{2+}$  and  $Ni^{2+}$ . Both  $Zn^{2+}$  and  $Ni^{2+}$  (both 400  $\mu M$ ) displayed time-courses very alike those observed when A6 cells are exposed to 400  $\mu M$   $Cd^{2+}$ .



Pretreatment with either  $\text{Zn}^{2+}$  or  $\text{Ni}^{2+}$  prevented the  $\text{Cd}^{2+}$ -inducible  $\text{Ca}^{2+}$ -increase normally observed suggesting that both metals exhibit similar mechanisms regarding their ability to evoke  $\text{Ca}^{2+}$  transients in A6 cells.

**Figure 9.**  $\text{IP}_3$ -generation in A6 cells at rest (zero sec) and after application of  $400\ \mu\text{M}\ \text{Cd}^{2+}$  for 15, 30 and 60 seconds expressed as mean  $\bullet$  SE from 30, 3, 14 and 18 experiments, respectively. Only 60 seconds of exposure differed significantly ( $p < 0.05$ ) from the controls. Thus, to obtain maximum  $\text{IP}_3$ -response the exposure time was set at 60 seconds in subsequent experiments.

**Figure 10.**  $\text{IP}_3$ -accumulation in A6 cells when exposed for 60 seconds to  $400\ \mu\text{M}\ \text{Cd}^{2+}$  and  $\text{Zn}^{2+}$  obtained from 18 and 8 experiments, respectively. Both cations increased the  $\text{IP}_3$ -content significantly compared with the non-treated control cells. Inserted:  $\text{Cd}^{2+}$ -induced  $\text{IP}_3$ -generation with and without U73122 treatment. Data are expressed as mean  $\pm$  SE.

**Table 1.** Summary of results of fura-2 loaded A6-cells obtained from control experiments, interactions studies and TG-experiments. The data is expressed either as  $\text{Ca}^{2+}_i$ -concentration given in nM or as the peak to basal-ratio (in some cases as the maximum to basal-ratio). p-values are given at 5% significance level (further details are stated in the text). Data are compared with  $\text{Cd}^{2+}$ -values except for TG-interactions data which are compared with TG-control values. NS = non significant.

<i>Control experiments (n)</i>	$\text{Ca}^{2+}_i$ -concentration		Peak/basal-ratio	
	Peak/maximum ( $\Delta[\text{Ca}^{2+}]_i$ in nM)	p-value	Peak/maximum	p-value
$\text{Cd}^{2+}$ (23)	579 ± 61		6.1 ± 0.6	
$\text{Zn}^{2+}$ (7)	1116 ± 210	< 0.001	14.0 ± 2.7	< 0.001
$\text{Ni}^{2+}$ (5)	868 ± 119	< 0.05	11.0 ± 1.8	< 0.01
TG (8)	337 ± 58	< 0.05	3.1 ± 0.5	< 0.02
TMB-8 (6)	1269 ± 233	< 0.001	14.9 ± 3.7	< 0.001
<i>Interactions (n) (pretreatment)</i>	$\text{Cd}^{2+}$ -induced $\text{Ca}^{2+}$ -increase ( $\Delta[\text{Ca}^{2+}]_i$ in	p-value	$\text{Cd}^{2+}$ -peak	p-value
400 $\mu\text{M}$ control (23)	579 ± 61		6.1 ± 0.6	
100 $\mu\text{M}$ control (4)	503 ± 106		4.5 ± 0.7	
$\text{Zn}^{2+}$ (4)	50 ± 9	< 0.001	0.3 ± 0.1	< 0.01
$\text{Ni}^{2+}$ (4)	42 ± 6	< 0.001	0.8 ± 0.1	< 0.01
TG (4)	262 ± 108	< 0.05	0.4 ± 0.1	< 0.01
TMB-8 (7)	55 ± 12	< 0.001	0.4 ± 0.1	< 0.001
U73122 (3) (Cd = 400 $\mu\text{M}$ )	238 ± 40	NS	2.1 ± 0.9	< 0.05
U73122 (3) (Cd = 100 $\mu\text{M}$ )	69 ± 16	< 0.05*	1.1 ± 0.5	< 0.02*
Neomycin (5)	50 ± 13	< 0.001	0.4 ± 0.1	< 0.001
<i>TG-experiments (n) (pretreatment)</i>	TG-maximum ( $\Delta[\text{Ca}^{2+}]_i$ in nM)	p-value	TG-maximum	p-value
Control (8)	337 ± 58		3.1 ± 0.5	
$\text{Cd}^{2+}$ (7)	383 ± 67	NS	2.3 ± 0.3	NS
Neomycin (5)	492 ± 84	NS	2.8 ± 0.6	NS
$\text{Zn}^{2+}$ (5)	532 ± 74	NS	2.7 ± 0.4	NS
$\text{Ni}^{2+}$ (4)	611 ± 161	NS	5.3 ± 0.8	NS
TMB-8 (5)	355 ± 94	NS	2.2 ± 0.6	NS
U73 → $\text{Cd}^{2+}$ (6)	458 ± 117	NS	3.6 ± 0.7	NS

\* compared with 100  $\mu\text{M}$   $\text{Cd}^{2+}$ -control.

Fig. 1

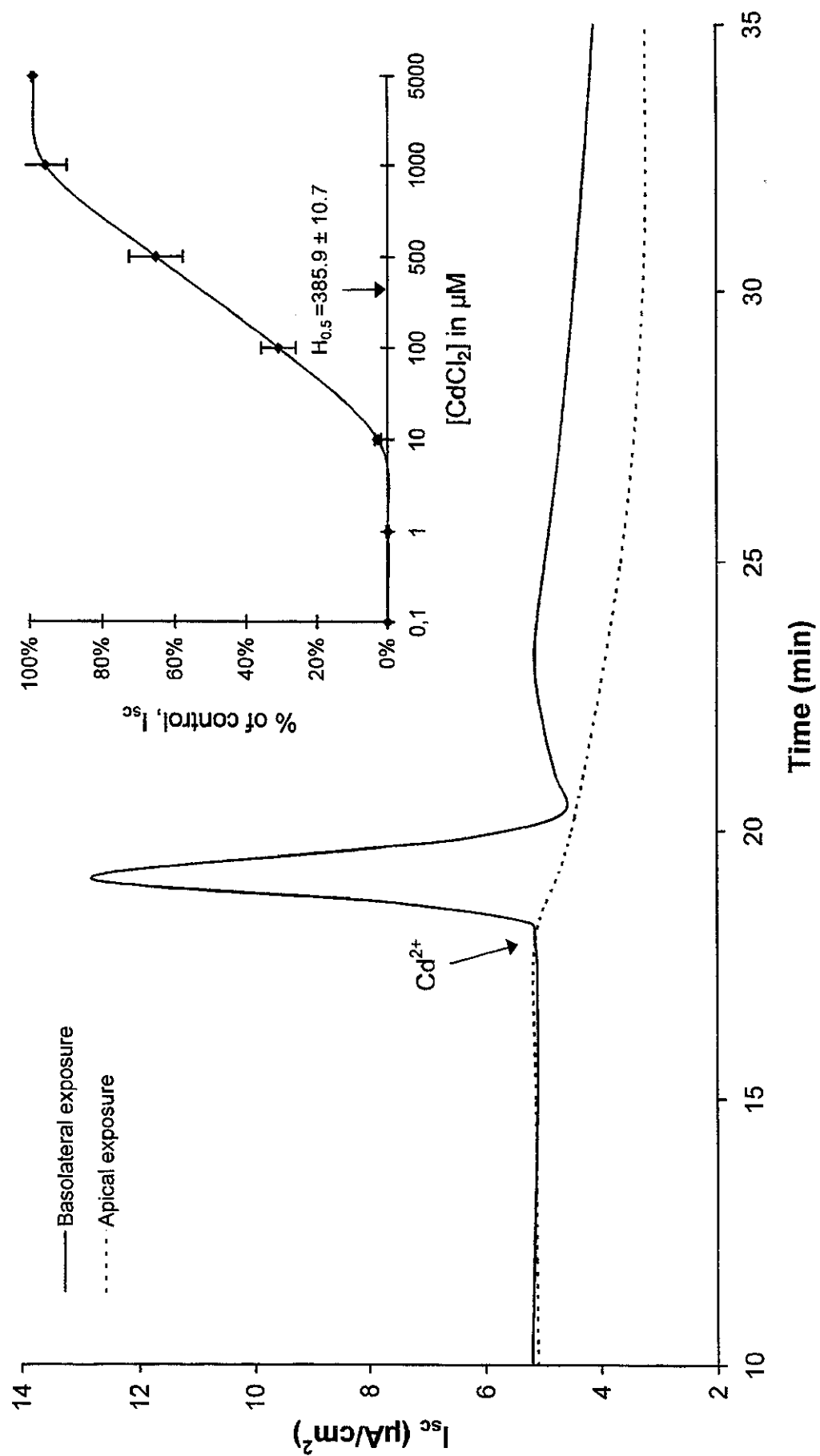
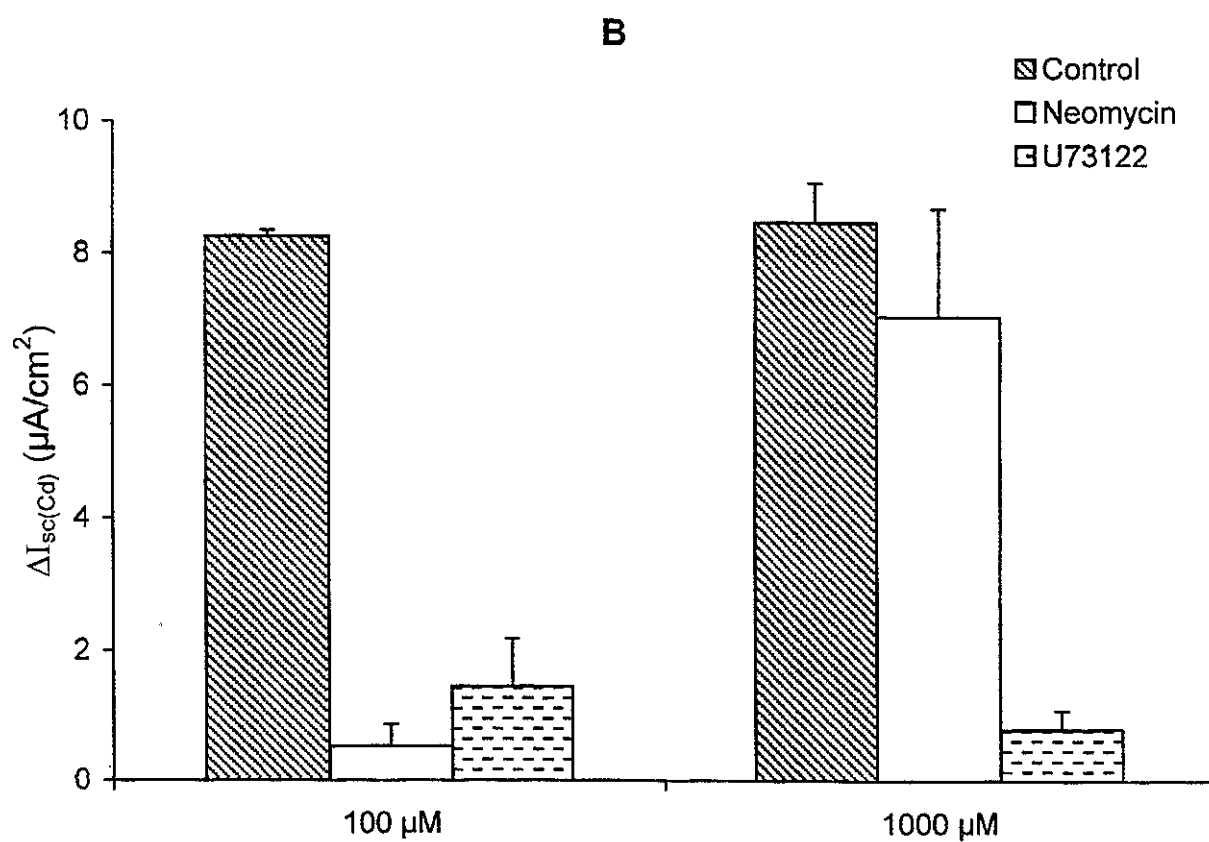
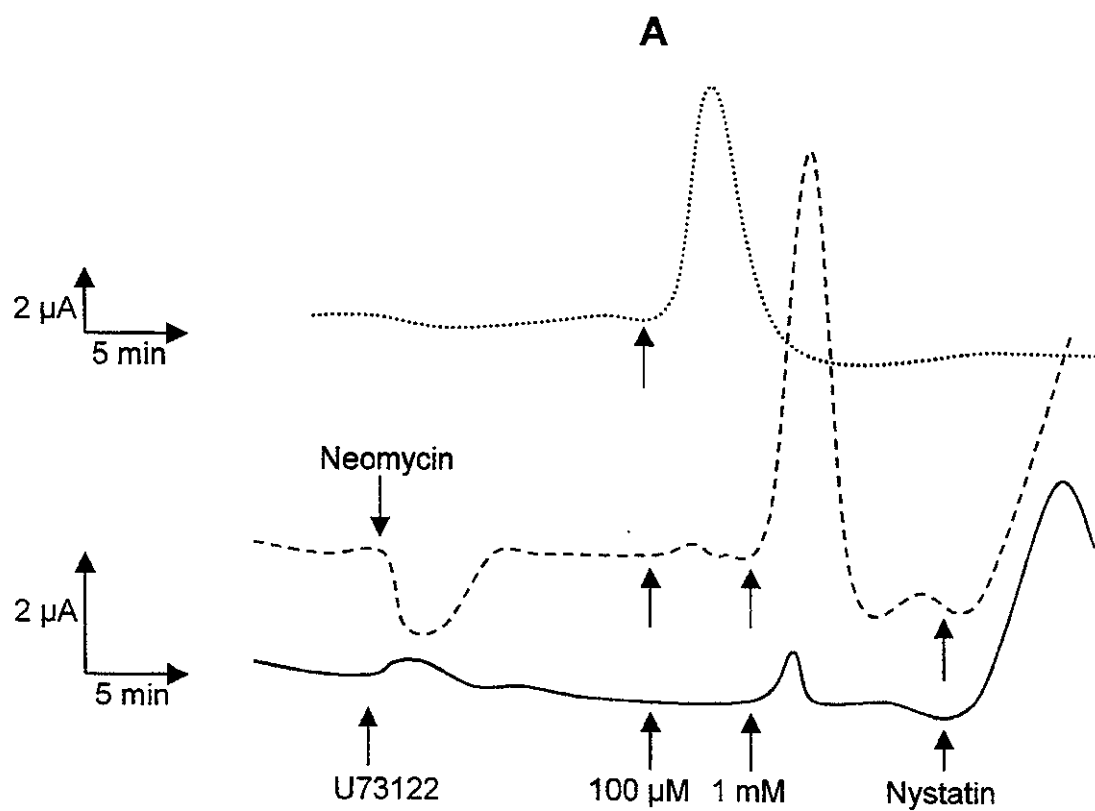


FIG. 2



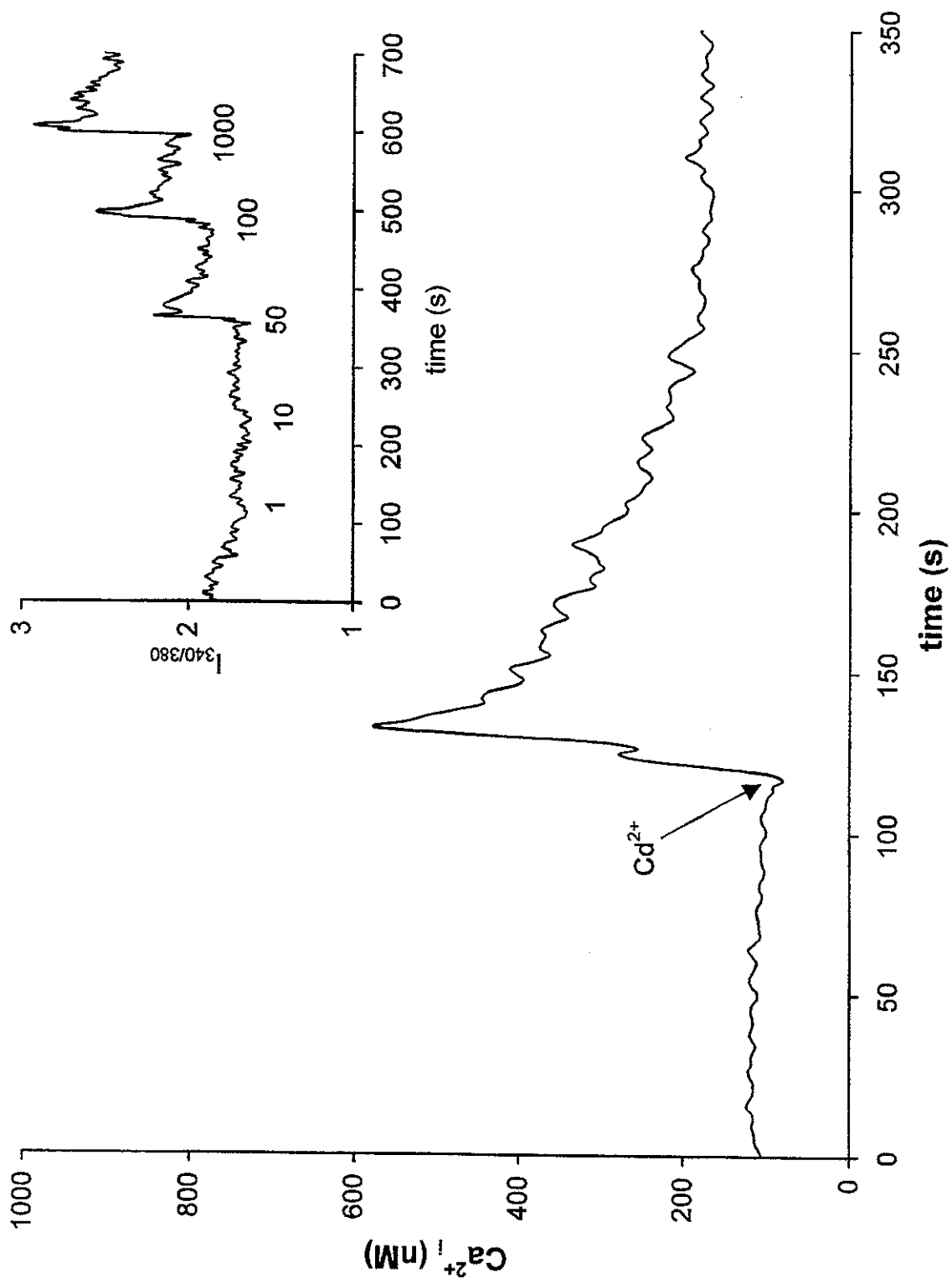


Fig.3

Fig. 4

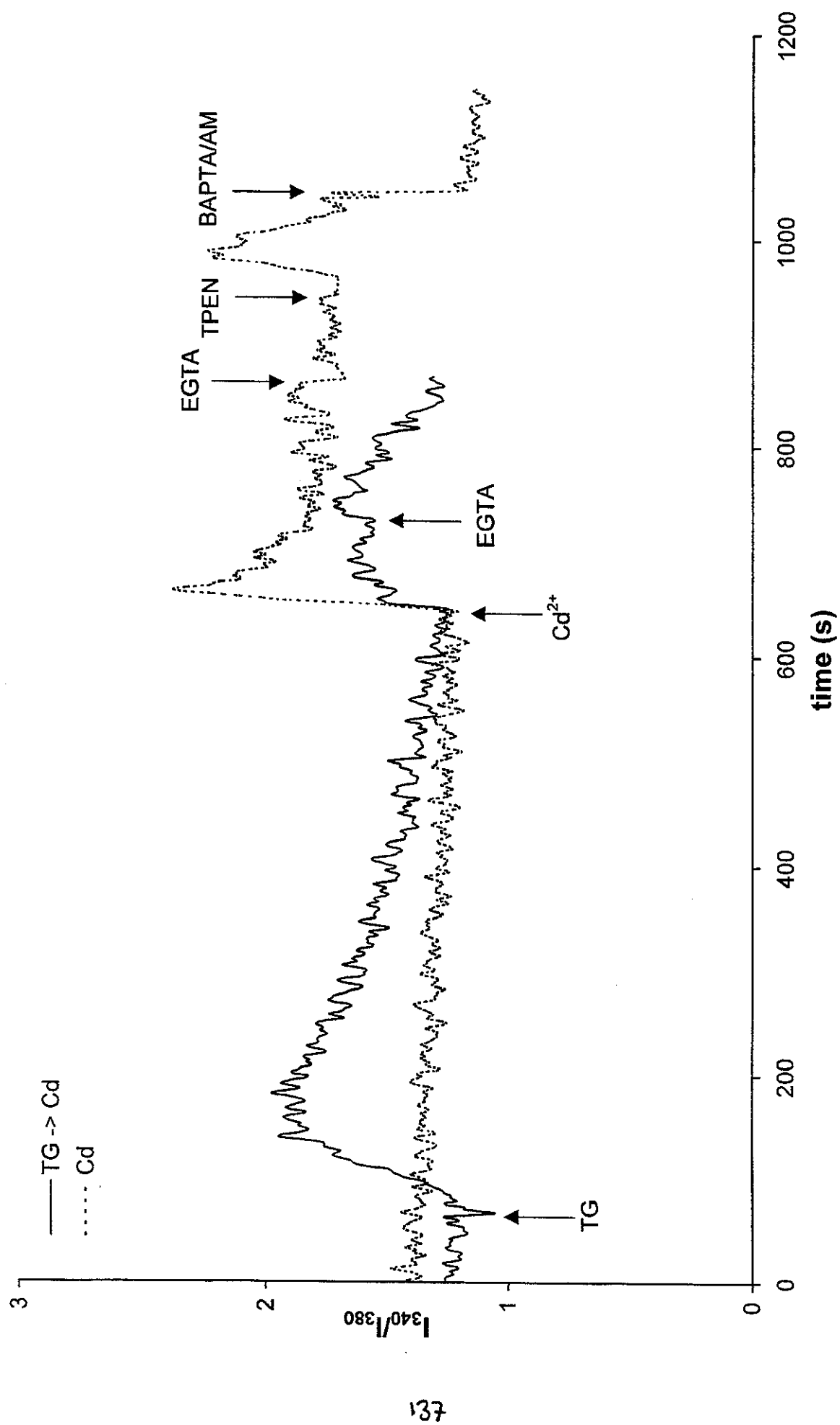


FIG. 5

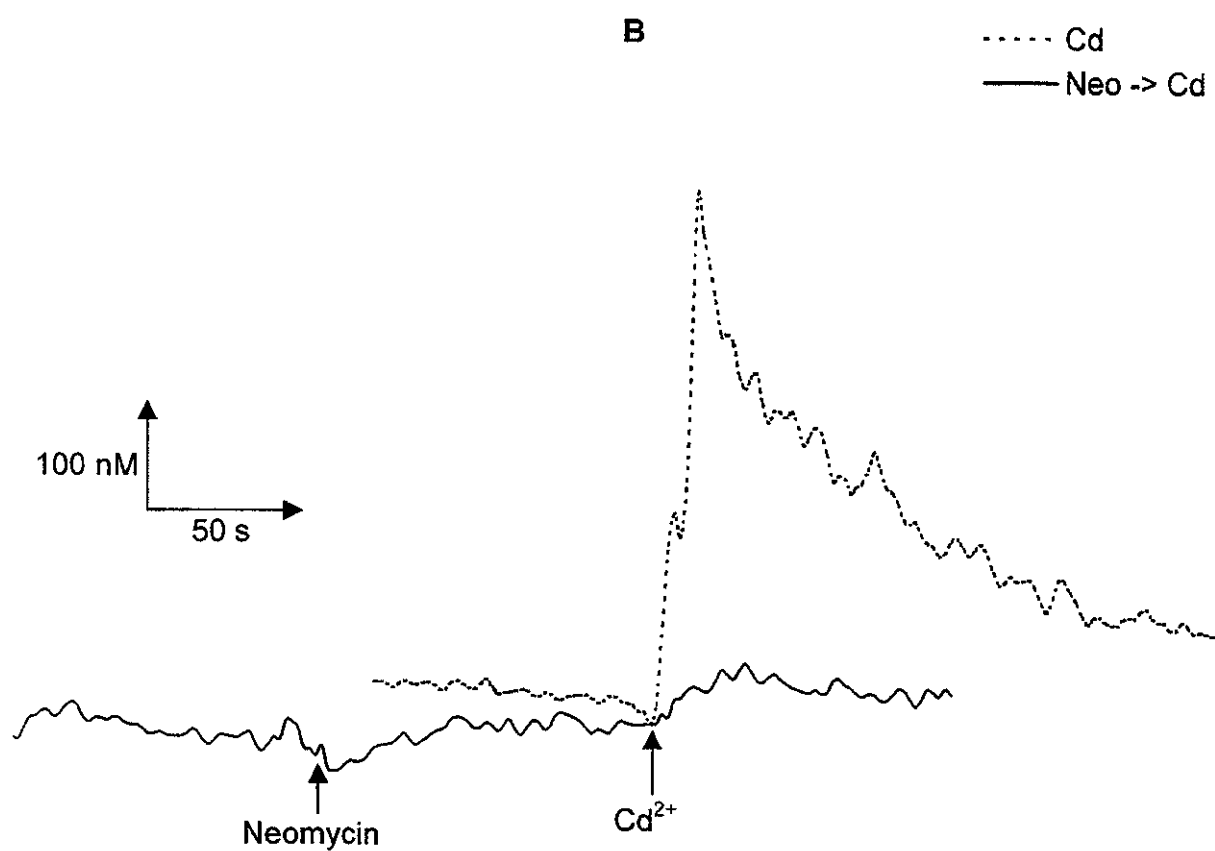
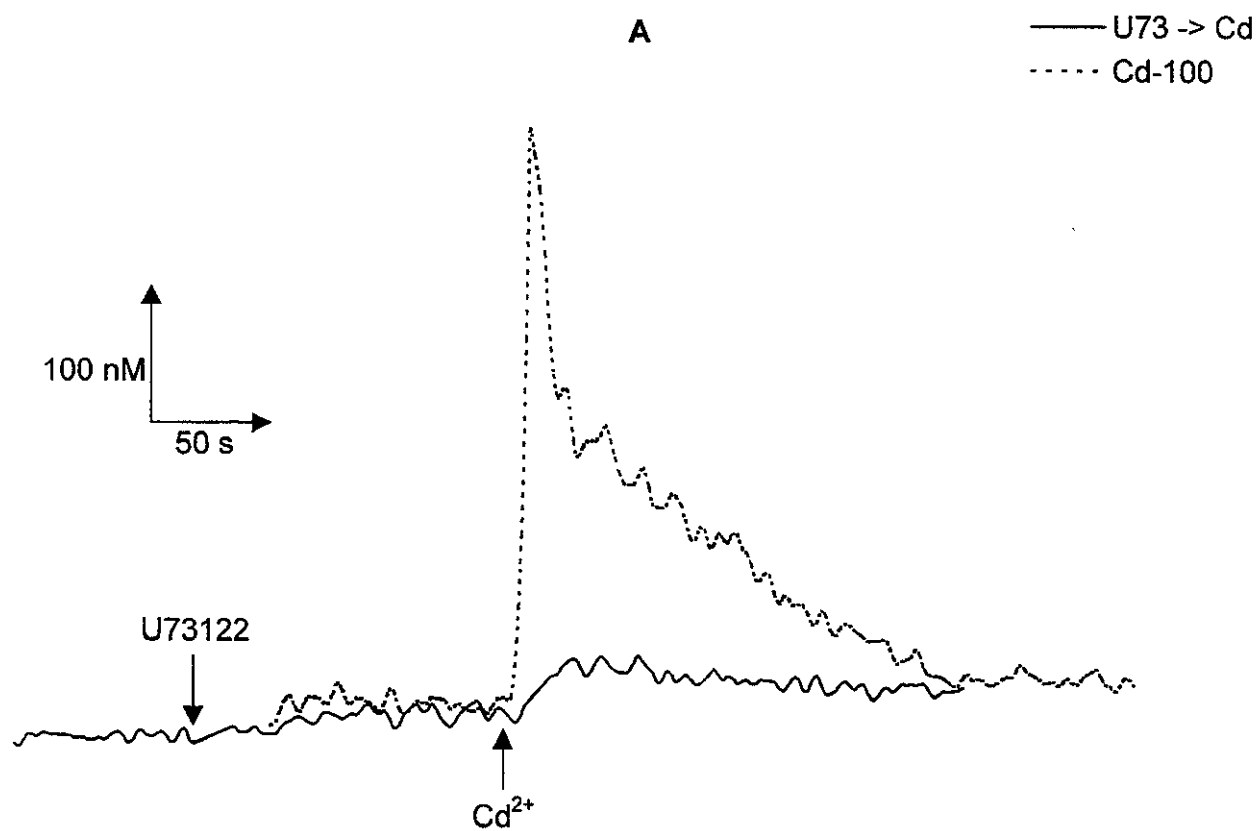


Fig. 6

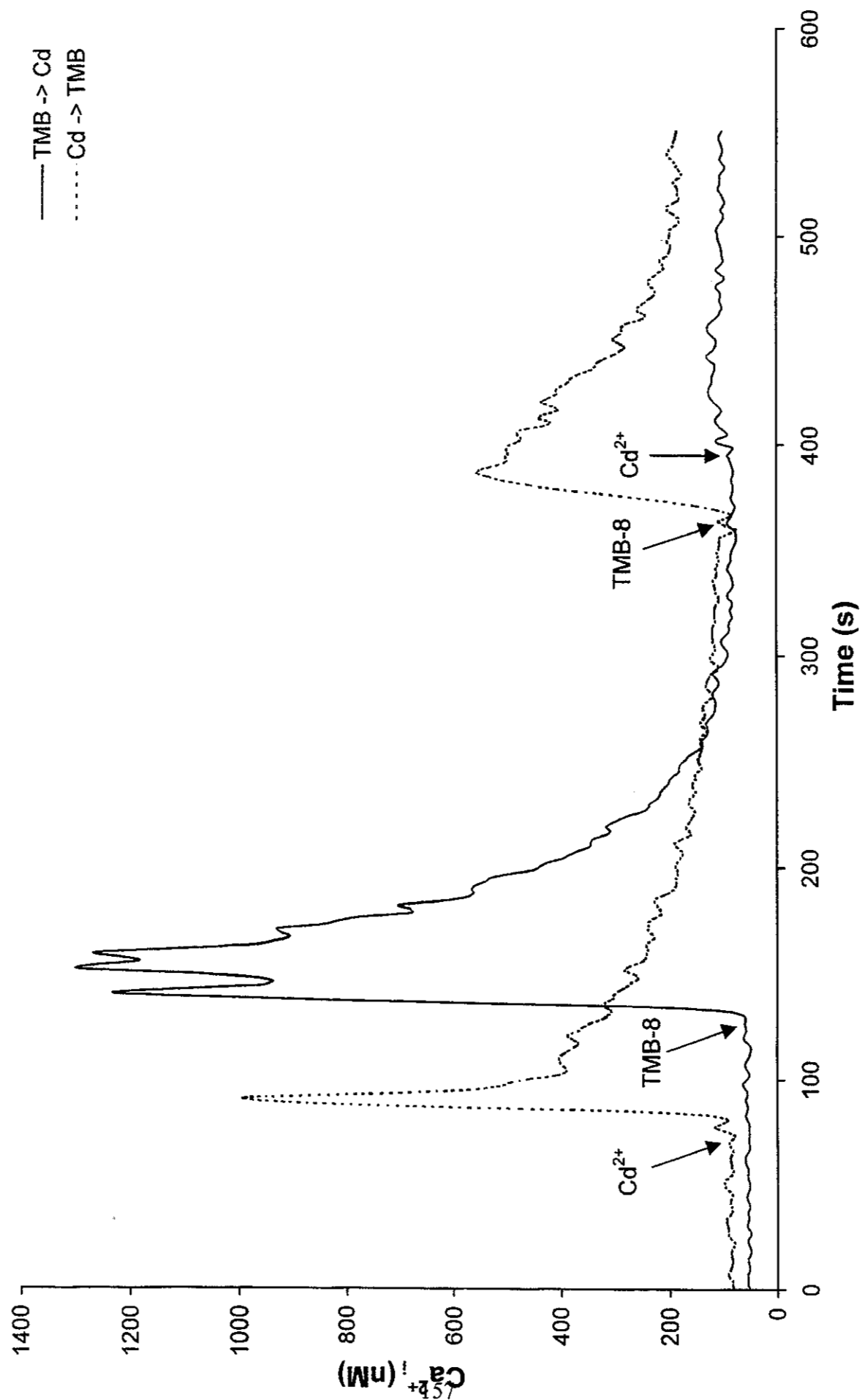




Fig. 7

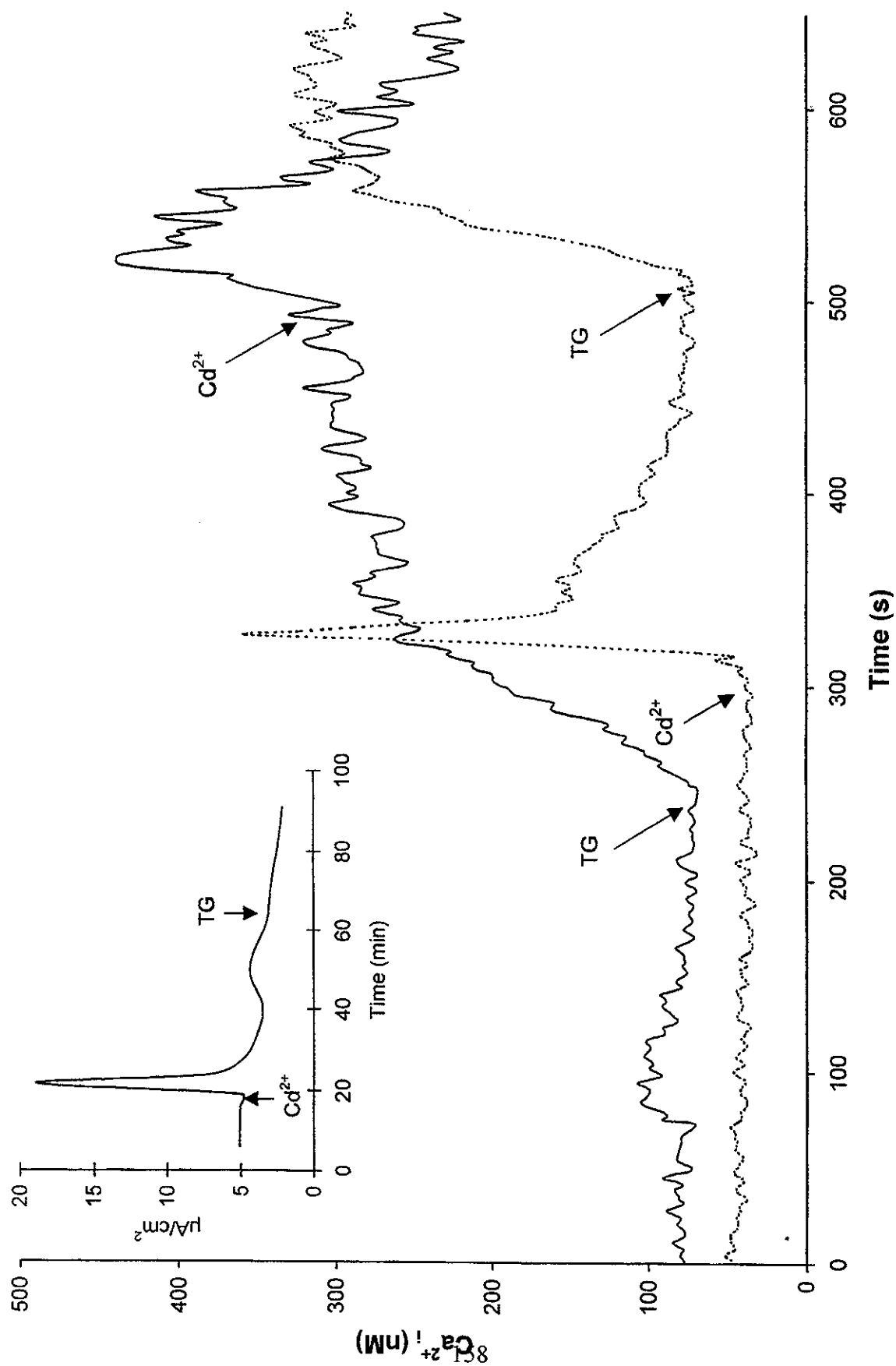
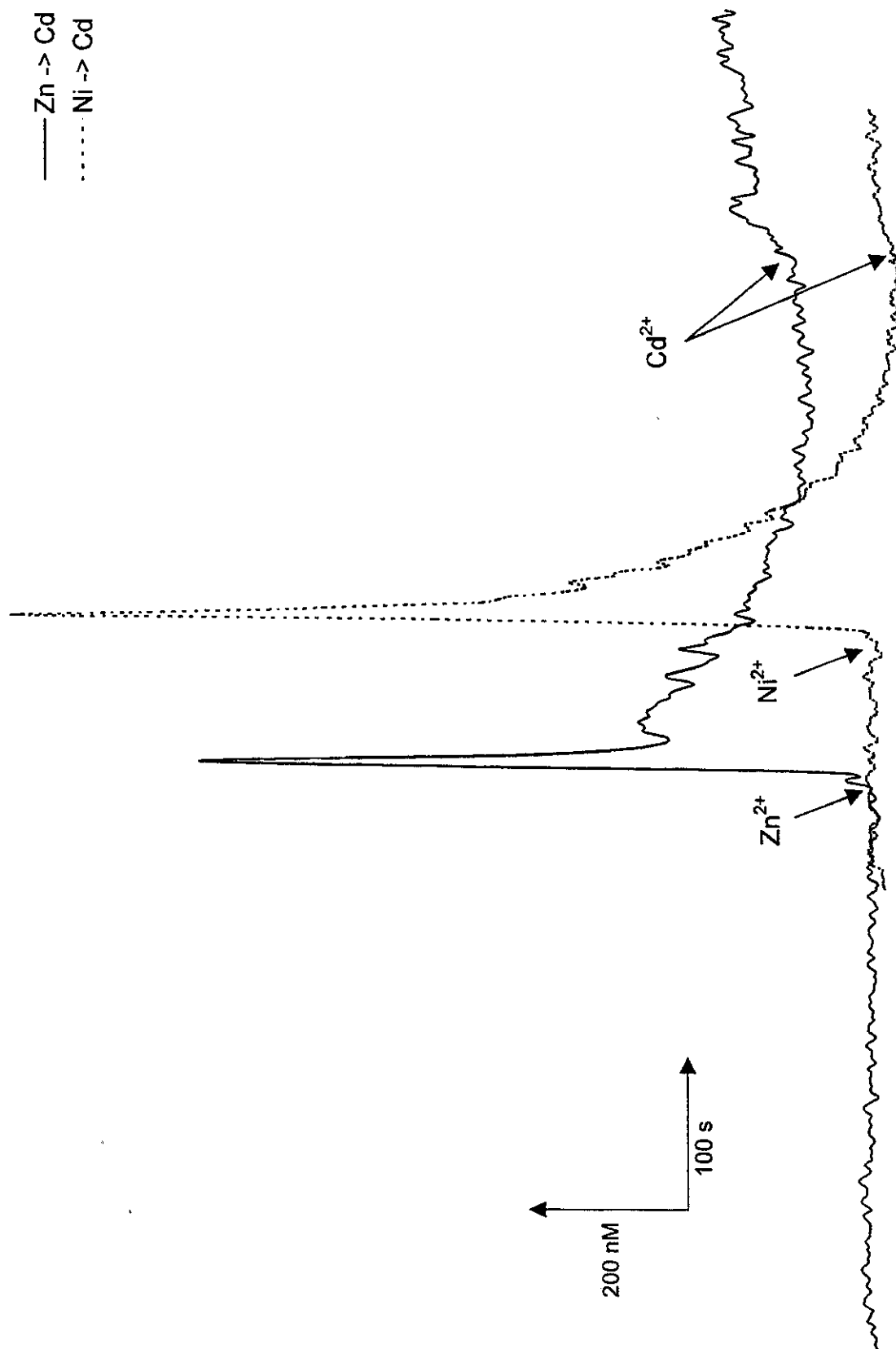


Fig. 8



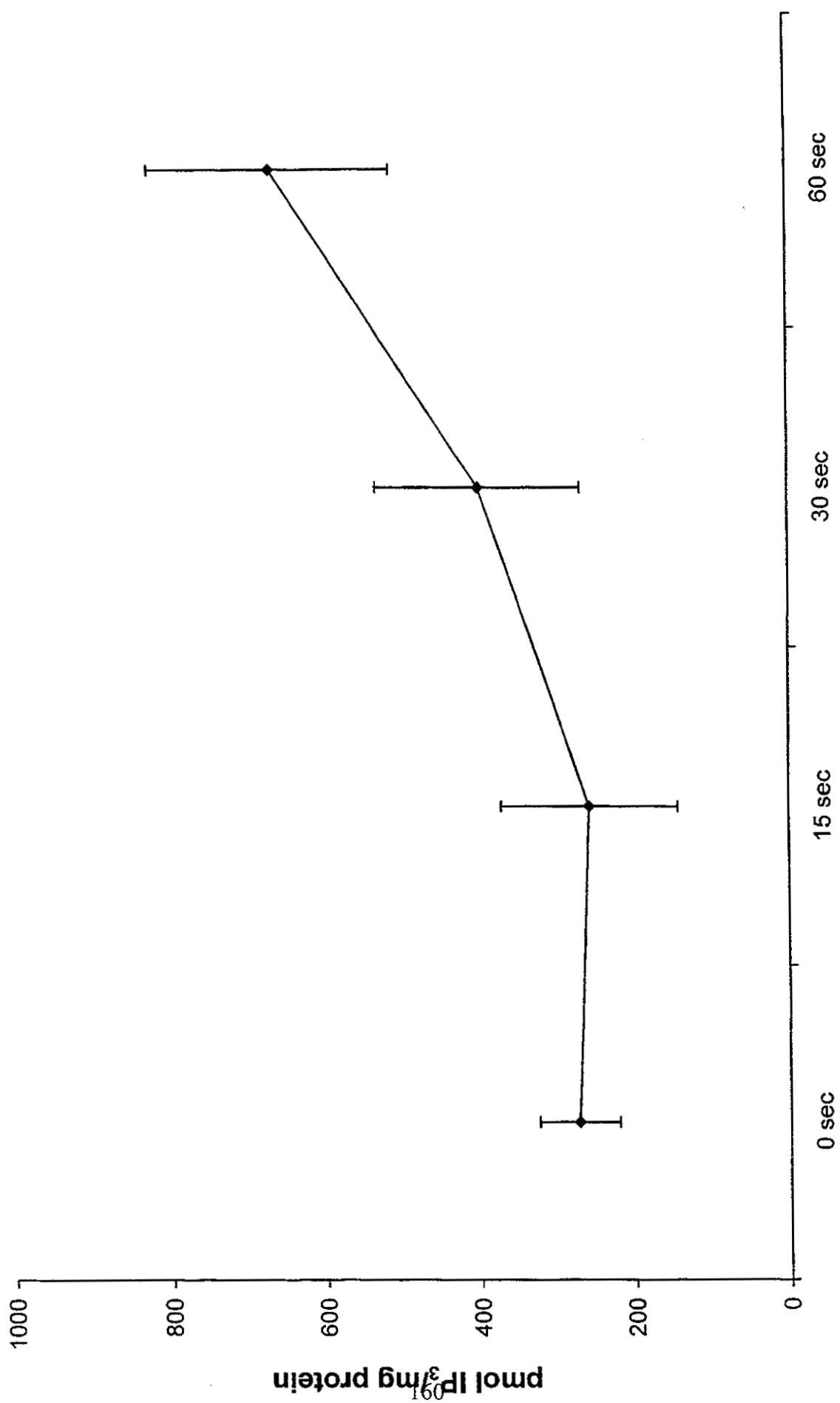


Fig. 10

